



**SANTA CRUZ COUNTY BUILDING DEPARTMENT**  
**ROBERT BANZHOF – BUILDING OFFICIAL**  
 2150 N. CONGRESS DRIVE ROOM 116  
 NOGALES, ARIZONA 85621  
 (520) 375-7880 FAX (520) 375-7886

**BUILDING PERMIT APPLICATION**

⇒ **SITE INFORMATION:**

◆ PARCEL NO. \_\_\_\_\_ LOT# \_\_\_\_\_ BLOCK# \_\_\_\_\_ SUBDIVISION \_\_\_\_\_  
 CITY/TOWN \_\_\_\_\_

OR

◆ LEGAL DESCRIPTION \_\_\_\_\_ PORTION OF \_\_\_\_\_  
 SECTION \_\_\_\_\_ TOWNSHIP \_\_\_\_\_ RANGE \_\_\_\_\_

◆ SITE ADDRESS (IF KNOWN): \_\_\_\_\_ VERIFY ADDRESS ? YES \_\_\_ NO \_\_\_  
 ◆ PARCEL SIZE: \_\_\_\_\_ SQUARE FEET OR \_\_\_\_\_ ACRES  
 ◆ PROPERTY FRONTS ON STATE HWY? NO \_\_\_ YES \_\_\_ ADOT # \_\_\_\_\_  
 ◆ FLOODPLAIN APPROVAL REQUIRED? NO \_\_\_ YES \_\_\_  
 ◆ Right of Way Permit: \_\_\_\_\_ N/A \_\_\_\_\_

⇒ **PROJECT INFORMATION:**

◆ **PERMIT TYPE:** \_\_\_\_\_ NEW CONSTRUCTION \_\_\_\_\_ GRADING PERMIT \_\_\_\_\_ ELECTRIC/ GAS \_\_\_\_\_

DESCRIPTION OF PROJECT: \_\_\_\_\_  
 BUILDING SQ. FT. (EXCLUDING GARAGE): \_\_\_\_\_ OR CUBIC YDS: \_\_\_\_\_ CUT \_\_\_\_\_ FILL \_\_\_\_\_  
 GUEST HOUSE / CASITA SQ. FT. (IF ANY) \_\_\_\_\_  
 GARAGE SQ. FT.: \_\_\_\_\_ OR CARPORT SQ. FT.: \_\_\_\_\_ PORCHES SQ. FT.: \_\_\_\_\_

◆ **BUILDING MATERIALS:**

CMU/BLOCK \_\_\_\_\_ METAL \_\_\_\_\_ FRAME/STUCCO \_\_\_\_\_ ADOBE \_\_\_\_\_  
 SEWER \_\_\_\_\_ OR SEPTIC APPLICATION # \_\_\_\_\_ OR ADEQ# \_\_\_\_\_

◆ **TYPE OF CONSTRUCTION:**

SINGLE FAMILY RESIDENCE \_\_\_\_\_ ADDITION: \_\_\_\_\_  
 MULTI FAMILY RESIDENCE \_\_\_\_\_ # OF UNITS \_\_\_\_\_  
 COMMERCIAL \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_  
 REMODEL \_\_\_\_\_ ACCESSORY BLDG. \_\_\_\_\_ OTHER \_\_\_\_\_

◆ **VALUATION \$** \_\_\_\_\_

⇒ **OWNER INFORMATION:**

PROPERTY OWNERS NAME \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

⇒ **CONTRACTOR INFORMATION:**

GENERAL	NAME _____	PHONE# _____
ELECTRICAL	NAME _____	PHONE# _____
PLUMBING	NAME _____	PHONE# _____
MECHANICAL	NAME _____	PHONE# _____

⇒ **DESIGNER:**

PLANS Y OWNER \_\_\_\_\_ PLANS BY BUILDER \_\_\_\_\_  
 PLANS BY ARCHITECT/ENGINEER:  
 NAME \_\_\_\_\_ PHONE# \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**DATE**

**PERMIT#** \_\_\_\_\_

**PLCK/Z\$** \_\_\_\_\_

**PERMIT FEE: \$** \_\_\_\_\_