



City of Tombstone

P.O. Box 339, 1420 E. Fremont, Tombstone, AZ. 85638
Phone (520) 457-3823 - Fax (520) 457-3824

Application for a Building Permit for placement of a **Manufactured Homes**

Box 1

Date of Application _____ Date of issuance _____ Issued by _____

Box 2

Property Owner Must Be Named

Permit granted to _____ Phone _____

Address of owner _____

Box 3

Project

Project Address _____ Project Value _____

Assessor Parcel Id. 109- _____ Subdivision _____ Lot # _____ Zoning _____

Parking Requirements() Front setback (____ft.) Rear setback (____ft.) Side setback (____ft.)

Box 4

.Work will be Performed by

Dealer Name _____ Contact Person _____ Phone _____

Set up Contr. _____ Lic. # _____ Contact Person. _____ Ph. _____

Utility Contr. _____ Lic. # _____ Contact Person. _____ Ph. _____

Plumbing Contr. _____ Lic. # _____ Contact Person. _____ Ph. _____

Septic tank Contr. _____ Lic. # _____ Contact Person. _____ Ph. _____

Electrical Contr. _____ Lic. # _____ Contact Person. _____ Ph. _____

Box 5

Permit Types For Building Official Use Only .

Site land clearing Manufactured Home Utilities Requiring a right of way

Set back measurements are; Front-25', Sides-10', Rear-10'

Minimum Requirements For Permit Submittals

A. Plat plan. Show the following.

- (1) Property dimensions and property orientation to North.
- (2) Point of origin for all site utilities and point of connections to the building.
- (3) Placement of the structure upon the property, to scale and orientation to North.
- (4) The street names and location of driveways for access upon the property!
- (5) Any recorded easement or variance of the property.

Applicants signature _____

Date signed _____ Applicants status _____

The applicant may be other than the property owner, so long as the owner is named on the permit.

In Accordance with A.R.S. Title 32

I am currently a licensed contractor:

Contractor Name: _____

Doing Business As: _____

ROC License #: _____ / Classification of ROC License: _____

Contractor's Signature: _____ Date: _____

Title: _____

I am an Owner/Builder:

Owner/Builder Name: _____

Owner/Builder Address: _____

Owner/Builder Signature: _____ Date: _____

EXEMPTION FROM LICENSING

I am exempt from Arizona Contractors' license laws on the basis of the licensing exemptions contained in A.R.S. 32-1121A.

- I am the Owner/Builder of the property. I will follow in strict compliance with 32-1121A.5. The property is intended for sole occupancy by the owner, not intended for occupancy by members of the public, owner's employees or business visitors. The structures are **NOT INTENDED FOR SALE OR RENT WITHIN 1 YEAR AFTER COMPLETION.**
- I am the Owner/Developer of the property. I will follow in strict compliance with 32-1121A.6. I will contract with a General Contractor licensed pursuant to this chapter. To qualify for this exemption, all licensed contractors' names and license numbers working on this project shall be included on this application and contained within all sales documents.
- Other Exemption: _____

I fully understand that the exemption provided by A.R.S. 32-1121A.14 (the Handyman Exemption) does not apply to ANY construction project which requires a building permit, is the smaller part of a larger project and/or the total aggregate contract price including labor, materials and all other items is \$1,000 or more.

I will be using the following licensed contractors or sub-contractors on this project:

(General Contractor) ROC License #: _____ Class: _____

(Mechanical Contractor) ROC License #: _____ Class: _____

(Electrical Contractor) ROC License #: _____ Class: _____

(Plumbing Contractor) ROC License #: _____ Class: _____

FALSIFICATION OF INFORMATION ON THIS DOCUMENT FOR THE PURPOSE OF EVADING OR ATTEMPTING TO EVADE STATE LICENSING LAWS IS A CLASS 2 MISDEMEANOR PURSUANT TO ARIZONA REVISED STATUTES 13-2704.

I have read and fully understand all of the information contained within this document. The above information provided by me on this document is true and accurate to the best of my knowledge.

PRINT FULL NAME AND ADDRESS:

Signature: _____ Date: _____

I am currently a licensed contractor:

Contractor Name: _____

Doing Business As: _____

ROC License #: _____ / Classification of ROC License: _____

Contractor's Signature: _____

Title: _____

I am an Owner/Builder:

Owner/Builder Name: _____

Owner/Builder Address: _____

Owner/Builder Signature: _____

EXEMPTION FROM LICENSING

I am exempt from Arizona Contractors' license laws on the basis of the licensing exemptions contained in A.R.S. §32-1121A.

I am the Owner/Builder of the property. I will follow in strict compliance with §32-1121A.5. The property is intended for sole occupancy by the owner, not intended for occupancy by members of the public, owner's employees or business visitors. The structures are **NOT INTENDED FOR SALE OR RENT WITHIN 1 YEAR AFTER COMPLETION.**

I am the Owner/Developer of the property. I will follow in strict compliance with §32-1121A.6. I will contract with a General Contractor licensed pursuant to this chapter. To qualify for this exemption, All licensed contractors' names and license numbers working on this project shall be included on this application and contained within all sales documents.

Other Exemption: _____

CITY OF TOMBSTONE
Residential Permit Application Instructions And Intake Checklist

Complete the following information, include complete site plan (to be completed by septic designer/soil evaluator if a septic system is required) and required fees (must be for the total required amount, with checks payable to "Cochise County Treasurer"). Include Tax Parcel ID Number on all application pages and on any correspondence regarding your permit application. PLEASE NOTE: Incomplete applications will not be accepted.

- Joint Permit Application: complete left side of application and sign**
- Complete site plan on 8 ½" x 11" paper APPROVED BY THE CITY OF TOMBSTONE FOR ZONING AND ROW.**NOTE: Site plan must be complete and clearly legible and include information on Site Plan Instructions below.
- Proof of Valid Contractor's Form: completed and signed**
- Supplemental application form for manufactured home with all installers license numbers (mobile homes not allowed)**
- Sewage System Design Checklist**
- Written assurance from provider of sewer & water utilities on community water & sewer systems submitted**
- Tombstone Aqueduct located on parcel? Y or N. If yes, emailed to Tombstone on _____**
- If subject parcel in flood zone applicable OMH approvals submitted**
- Show location and type of all accessories such as decks, awnings, skirting, etc. Construction plans and State approval are required.
- SB-1598 Form**
- Fees: _____**
- Current Assessors' Parcel Map _____**
- Additional submittal requirements: _____**

- Accepted by _____ Date _____**

Applications can be submitted to the following Cochise County Community Development Offices:

Bisbee – Main Office
1415 Melody Lane, Building E
Bisbee, Arizona 85603
(520) 432-9240

Sierra Vista – Satellite Office
4001 E Foothills Drive
Sierra Vista, Arizona 85635
(520) 803-3960

Benson Service Center - Satellite Office
126 W 5th Street
Benson, Arizona 85602
(520) 586-8180(Tuesday by appointment only)

Willcox Service Center - Satellite Office
450 S Haskell Avenue
Willcox, Arizona 85643
(520) 384-7140 (Thursday by appointment only)

Residential Site Plan Instructions

Draw site plan on 8½" x 11" paper. For all items, note whether existing (e) or proposed (p). If a new septic system is proposed, the site plan must be prepared by a Health Department certified Septic System Site Evaluator. Contact the Community Development Department at (520) 432-9240 if you have questions or need assistance with your application.

- _____ 1. Tax parcel ID number, north arrow and scale (if a scale is used)
- _____ 2. Property lines and all dimensions (from Assessors' Parcel map) – include entire parcel
- _____ 3. If parcel is a new split, show parent parcel and your parcel's location – with dimensions
- _____ 4. All easements – label type (road right of way, utility, drainage, etc.) and width
- _____ 5. Location of utility lines (electric, gas, water, etc.)
- _____ 6. Driveway location AND roads adjoining the property with name of road
- _____ 7. Show direction of drainage on the property
- _____ 8. Any construction related to a wash, such as a bridge, culvert, dip crossing, or fill, either on the parcel or off-site. Note whether temporary or permanent.
- _____ 9. Location, depth, and width of all drainageways or washes
- _____ 10. Distance from proposed structures to any drainageway or wash
- _____ 11. Distance from structures to all property lines and roads, and distance between residences on the subject parcel
- _____ 12. Location of wells, septic tanks, leach fields and 100% expansion areas, and distance from septic system to buildings, property lines, any drainageway or wash, & locations of test pits
- _____ 13. Direction of slope of land in area of proposed leach fields and expansion areas, indicate % slope
- _____ 14. Location and dimensions of all buildings, and their uses
- _____ 15. Location, height, length and material of walls and fences – for chainlink fences, note if slatted

City of Tombstone

Office of the Building Official

P.O. Box 339

611 E. Allen Street

Phone: (520) 457-3415

Tombstone, AZ 85638

Fax: (520) 457-3516

E-Mail: publicworks.tombstone@gmail.com

Residential Manufactured/Mobile Home Water/Wastewater Check List

Property Owner: _____ Parcel #: _____

Address: _____

The following is a check list of items for water and wastewater utilities for those residents on the *City of Tombstone, Water & Wastewater* (if applicable) System:

Note: Zoning for Mobile/Manufactured Homes in the *City of Tombstone* is located within a subdivision where septic systems are authorized.

- ___ Issuance of a proper residential address (if required) in compliance with the *Enhanced-911 Emergency Response (E-911) Addressing System*.
- ___ Initial Application for Water & Wastewater (if applicable) Service(s).
- ___ Marking of location (in white) for installation of water & wastewater (if applicable) service(s) for the purpose of locating other utilities (*Arizona Blue Stake*).
- ___ Installation of water & wastewater (if applicable) service(s), upon completion of minimum mandatory three-day location period required by *Arizona Blue Stake* for location of possible adjacent utilities.
- ___ Payment of all fees, via invoice, including a \$100.00 administrative fee as well as fees for labor, material, parts and equipment required for installation of water & wastewater (if applicable) service(s).

Approved: _____ Not Approved: _____

Name (Print): _____ Date: _____