SOUTH TUCSON			(FOR OFFICE USE ONLY) CITY CLERK OFFICE Permit Information:
			Permit #
1601 SOUTH 6TH AVENUE			Date Issued
(520) 792-2424			Commercial
(520) 628-9619 FAX			Residential
			Permit Fee
RESIDENTIAL O	COMMERCIAL	0	Receipt #
Please check if permit is for owner-occupied:			Clerk:

PLEASE FILL OUT THE FRONT AND BACK OF THIS APPLICATION

APPLICANT INFORMATION

NAME:

ADDRESS:

PHONE NUMBER:

E-MAIL:

ADDRESS/LOCATION OF PROPOSED PERMIT ACTIVITY:

PROPERTY OWNER'S NAME, ADDRESS AND TELEPHONE NUMBER:

DESCRIPTION OF WORK AND/OR TYPE OF INSPECTION REQUIRED:

SQUARE FOOTAGE OF CONSTRUCTION AREA:

ESTIMATED VALUATION: \$

PIMA COUNTY WASTEWATER PERMIT #

(REQUIRED FOR NEW CONSTRUCTION AND ADDITIONS THAT AFFECT WASTEWATER OPERATIONS)

SIC CODE #

COMMERCIAL APPLICATIONS ONLY

PRINT NAME AS WILL BE DISPLAYED ON OFFICIAL PERMIT

NAME OF BUSINESS/OWNER:

BUSINESS/OWNER ADDRESS:

BUSINESS/OWNER TELEPHONE NUMBER:

SIGN PERMIT APPLICATION

SIGN CONTRACTOR INFORMATION

NUMBER OF SIGNS:

SQUARE FOOTAGE OF SIGN:

ESTIMATED VALUATION: \$

SIGN CONTRACTOR:

ADDRESS:

ROC #

TELEPHONE NUMBER:

REQUIRED: City of South Tucson Business License: #

NAME:

ADDRESS:

TELEPHONE NUMBER:

ROC #

REQUIRED: City of South Tucson Business License: #

ELECTRICAL SUBCONTRACTOR INFORMATION

NAME:

ADDRESS: TELEPHONE NUMBER:

ROC #

REQUIRED: City of South Tucson Business License: #

PLUMBING SUBCONTRACTOR INFORMATION

NAME:

ADDRESS: TELEPHONE NUMBER:

ROC #

REQUIRED: City of South Tucson Business License: #

MECHANICAL SUBCONTRACTOR INFORMATION

NAME:

ADDRESS: TELEPHONE NUMBER:

ROC #

REQUIRED: City of South Tucson Business License: #

I UNDERSTAND THAT A REINSPECTION FEE IS REQUIRED FOR ANY SECOND OR FAILED INSPECTION AND THEREAFTER.

UNDER PENALTY OF PERJURY, I/WE DECLARE THAT THE INFORMATION IN THIS DOCUMENT IS TRUE AND CORRECT.

X	DATE:		
Applicant's Signature			
Permit Type:			
Building Curb Cut/ROW Gas	Mobile Home Plan Reading		
Plumbing Sprinkler Sign Str	eet Cut Other:		