



**STATE OF ARIZONA
DEPARTMENT OF HOUSING**

1110 WEST WASHINGTON ST, SUITE 280
PHOENIX, ARIZONA 85007
Office: (602) 771-1000

PLAN REVIEW AND APPROVAL APPLICATION

NEW APPLICATION EFFECTIVE JULY 1, 2018

CONTRACTOR, INSTALLER, OTHER: (Complete section below)		MANUFACTURERS ONLY: (Complete section below)
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Flood Plain	License No.: _____ License Type: _____
<input type="checkbox"/> Factory Built Building Installation Occupancy Type: _____ Building Size (Box): _____ Utilities (Check all that apply): <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Electric <input type="checkbox"/> Gas AZ manufacturer issued insignia number(s): _____		<input type="checkbox"/> Factory Built Building (New Construction)
		<input type="checkbox"/> Factory Built Building Reconstruction
		<input type="checkbox"/> Compliance Control Manual
		<input type="checkbox"/> Design Structural Package
<input type="checkbox"/> Supplement Plan Original AZ Plan Approval Number: _____		<input type="checkbox"/> Supplement Plan Original AZ Plan Approval Number: _____
Applicant's Name (Contractor, Installer, Manufacturer, or Other) Mailing & Shipping Address Telephone Number		
Contact Name & E-mail Address (Required)		
Installation Site Address (Exceptions: Compliance Control Manual, Structural Package, or Typical Plan)		
INCLUDE SELF ADDRESSED STAMPED PACKAGE, OR MEANS OF RETURN DELIVERY IF UNABLE TO RETRIEVE APPROVED PLANS FROM THE OFFICE		

Submit minimum two (2) copies of this application, documents / plans for review and the following fee*:	
Document / Plan review fee (includes one hour of plan review)	\$175.00
Document / Plan Review fee per each additional hour (billed at completion of review)	\$125.00

SECTION BELOW FOR OFFICE USE ONLY		
RECEIPTING	APPROVAL STAMP	
Submittal fee	PLAN LOG #	
Less Fee Received		
Payment No.		
Receipt No.		
Additional Hours		() x \$125.00 / Hour
Copies Printed		() x \$0.50 each
Balance Fee Owed		
Payment No.		
Receipt No.		

*Make checks payable to: **ARIZONA DEPARTMENT OF HOUSING**