## SEDONA FIRE DISTRICT

2860 Southwest Drive, Sedona, AZ 86336 Community Risk Reduction Division – 928.204.8926 CRR@sedonafire.org



## PERMIT APPLICATION FOR COMMERCIAL/MULTI-FAMILY HOUSING

Please complete the application and email it as a PDF attachment to crr@sedonafire.org.
ncomplete, handwritten, or photos of completed applications will not be accepted and will be returned.
Assistance completing the form is available at Sedona Fire District Administrative Office. Office hours are Mon-Thurs 7:30 am to 4:30 pm.

New Construction	Demo	Addition	Alteration	Tenant Improvement	
INICODA A TION DECADDING T	LUC DDOLEC	<b>T</b>			
INFORMATION REGARDING T		. I			
City / County Permit Number Parcel Number (APN)					
Job site address (please					
include suite number if					
applicable)					
Name of Primary Contact					
Primary contact phone numb	er				
Primary contact E-mail	CI				
Scope of work: (please add as					
much detail as possible)					
CONTRACTOR INFORMATION					
Contractor Name:					
Contractor Company Name					
Contractor Mailing Address					
Contractor Phone Number					
Contractor E-mail					
PROPERTY OWNER INFORMA	TION				
Name of Property Owner					
Property Owner Mailing					
Address					
Property Owner Phone					
Number					
Property Owner E-mail					
4 B OLUTE OT 11 15 O D 14 T 10 V					
ARCHITECT INFORMATION					
Name of Architect					
Architect Mailing Address					
Architect Phone Number					
Architect E-mail					

DI III DINC IN	FORMATION.								
	FORMATION	l		T					
Number of	Current sq.		Added Sq.		Total Sq.				
Stories	footage		footage		Footage				
Does this building contain any of the following:									
Fire Alarm: Yes No			Fire Sprinklers: Yes No						
Kitchen Hoo	d Suppression System: Yes	I don't know:							
Is this a vacant site: Yes No									
Please describe, in detail, the type of proposed business activity. Please include as much information as possible:									
	proposal, why type of busir nation as possible:	ness activity w	ras conducted	at this location	on? Please inc	lude as			

Person submitting this application is the:

(Please check only one): Owner Owner's Agent Contractor Contractor's Agent

I certify that I have read this application and declare under the penalty of perjury that the information contained herein is correct and complete. I agree to comply with all Sedona Fire District adopted codes relating to the fire and life safety requirements. I hereby authorize representatives of Sedona Fire District to enter the above mentioned property for inspection purposes. I am either the owner of the property on the application, the Arizona State registered contractor for the work, or I represent the owner or contractor as signified below and am acting with the owner's/contractors full knowledge or consent. I also acknowledge that the primary form of communication by Sedona Fire District is electronic

Print Name Today's Date