

Town of Payson  
Building Department  
303C N. Beeline Highway  
Payson AZ 85541  
Phone: 928-472-5030  
TDD Phone: 928-472-6449  
Fax: 928-472-7490

date stamp



## Commercial/TI Building Permit Application:

Permit#: \_\_\_\_\_ Staff Intls: \_\_\_\_\_

Last Modified 4/6/16

☐ New Business      ☐ Existing Business      ☐ Own Building      ☐ Rent Building

Business Name: \_\_\_\_\_ Payson Bus. License # \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Current Business Address: \_\_\_\_\_

Job Site or New Business Address: \_\_\_\_\_

Building Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

General Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Payson Bus. License # \_\_\_\_\_ Contractor Lic #: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Payson Bus. License # \_\_\_\_\_ Contractor Lic #: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Payson Bus. License # \_\_\_\_\_ Contractor Lic #: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Payson Bus. License # \_\_\_\_\_ Contractor Lic #: \_\_\_\_\_

Architect: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Payson Bus. License # \_\_\_\_\_ email address: \_\_\_\_\_

Description of work: \_\_\_\_\_

**Square Footage being affected as a result of this permit:**

Commercial Sq Footage \_\_\_\_\_ Public Building Sq Footage \_\_\_\_\_ Other \_\_\_\_\_

Class of Work: New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Valuation: \$ \_\_\_\_\_

Applicant Name Printed: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person for Project: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

For Department Use Below this Line

Dev. Fees: Water: \_\_\_\_\_ Dev. Fee Total: \_\_\_\_\_

Review Fees: Bldg: \_\_\_\_\_ Zoning \_\_\_\_\_ Eng. \_\_\_\_\_ Fire : \_\_\_\_\_ Total P/R \_\_\_\_\_

Permit Fees: Bldg. \_\_\_\_\_ Fire \_\_\_\_\_ Eng. \_\_\_\_\_ Other: \_\_\_\_\_ Total Permits: \_\_\_\_\_ Grand Total: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_