



COCHISE COUNTY JOINT PERMIT APPLICATION

Cochise County Community Development, 1415 Melody Ln., Bldg. E, Bisbee, AZ 85603 (520) 432-9240. Fax (520) 432-9278, www.cochise.az.gov

PLEASE PRINT OR TYPE PARTS A-F BELOW

PART A: DESCRIPTION OF PROPERTY

Tax Parcel Identification # _____
 Subdivision _____
 Site Location/Address/City _____
 Property Owner Name _____
 Mailing Address/City/Zip Code _____
 Name of Applicant (if not property owner) _____
 Mailing Address/City/Zip Code _____
 Contact Person _____ Phone Number _____
 Email _____ Fax Number _____

PART B: PROPOSED PROJECT

Replacement Manufactured Home Yes No Year of Manufactured Home _____
 Gross Floor Area of Proposed Project _____ Structure Height _____
 Estimated Value of Proposed Project _____ If constructing an addition/improvement to existing structure, what is the assessed value of existing structure? _____

PART C: HEALTH SERVICES SECTION

1. Sewer or Septic System
 TO BE COMPLETED IF ON SEPTIC SYSTEM ONLY:
 Septic System: New Existing No. of Bedroom(s)/Den(s) _____
 Indicate who will perform work: Owner Contractor
 If contractor, list name and license # _____

2. Water Supply: Public Community Well Private Well

PART D: FLOODPLAIN SECTION

1. Will watercourse be altered/relocated as a result of proposed use? Yes No
 2. Proposed wash crossing: Bridge Culvert Dip Fill None
 3. If alteration or wash crossing, explain on site plan and note if Temporary or Permanent
 4. Any washes within 300' of the project? Yes No

PART E: HIGHWAY RIGHT-OF-WAY SECTION

1. Are any of the following existing on your property?
 Electricity TV Cable Telephone Sewer Gas Culvert Driveway
 2. Installation to property required:
 Electricity Underground Overhead TV Cable Underground Overhead
 Telephone Sewer Gas Culvert Driveway Water Line
 Other _____

PART F: CERTIFICATION SIGNATURE

I hereby certify that I am the owner or duly authorized owner's agent and that all information on this application and the attached site plan is accurate. I understand that if any of this information is false, it may be grounds for revocation of this permit. I further certify that I will comply with all County, State and Federal regulations applicable to said property, and **acknowledge that I am not authorized to begin work until I have received a numbered permit.** I FURTHER AUTHORIZE COUNTY EMPLOYEES AND APPROPRIATE REGULATORY AGENCIES TO ENTER ONTO SAID PROPERTY TO MAKE REASONABLE INSPECTIONS FOR COMPLIANCE.

Signature: _____ Date: _____

FOR DEPARTMENTAL USE ONLY

Assigned County Address _____
 Building Code Construction Plans submitted: Yes No SV Sub-Watershed
 Owner Built: Limited Non Code Hubbard Zone Tombstone Aqueduct BST
 Growth Area _____ Plan Designation _____ Tn. _____ Rg. _____ Sec. _____
 Zoning District _____ Map Ref. _____ Supervisor District _____
 Flood Zone _____ Panel # _____ Panel Date _____
 Lot Area _____ Setbacks: N _____ S _____ E _____ W _____

PERMIT PROCESSING INFORMATION

Right-of-Way Rev. By: _____ Date _____ Permit Required Y N
 Flood Control Rev. By: _____ Date _____ Permit Required Y N
 Health Services Rev. By: _____ Date _____ Permit Required Y N
 RAD Rev. By: _____ Date _____ Review Required Y N

Permit Type	Permit No.	Date Received	Fee	Receipt No.	Description
Bldg Code					
Bldg Code					
Bldg Code					
Non-Bldg Code					
Non-Bldg Code					
Manufactured Home/FBB					
Health					
Right-of-Way					
Flood Control					
RAD					
Review (Res/Comm)					
Surcharge/Other (specify)					
Other (specify)					
Total					

Permit approved for issuance by Permit Coordinator

Signature: _____ Date: _____

**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
- Proof of Valid Contractor’s Form:** complete and sign
- Sewage System Design Checklist**
- Complete site plan:** Clearly and legibly include all information on Site Plan Instructions (attached)
- If addition, please include floor plan (existing structure & proposed addition)**
- If new residence, a lighting plan and a completed lighting worksheet**
- If a manufactured or mobile home, a completed supplemental application form for manufactured and mobile home, and OMH flood procedures if parcel in a flood zone**
- Sierra Vista Sub-watershed Water Conservation Overlay Zone Permit Checklist**
- Construction plans:** two sets are required.
- Construction plan checklist completed by applicant.**
- Truss calculations:** two sets (if applicable).
- Written assurance from provider of sewer & water utilities for uses on community water & sewer systems submitted**
- Parcel in the military airport and ancillary military facility's operation area which requires compatibility review pursuant to ARS 28-8481**
- Fees:** _____
- Additional submittal requirements:** _____
- If parcel RU-4, 4 or more acres and owned by applicant, does applicant want to opt-out of building code inspections? Y or N or N/A**
- Check New World for approval of Agricultural Status, Legal Nonconformance’s, Lot Modifications and other items.**
- Tombstone Aqueduct located on parcel? Y or N. If yes, emailed to Tombstone on _____**
- Scan MH Form into New World**

Applications can be submitted to the following Cochise County Community Development, Planning, Zoning & Building Safety Department 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)

-
- Check – ROW (if applicable), flood zone, and zoning**
 - Include Current Assessors’ Parcel Map**

FOR STAFF USE ONLY: _____
Accepted by _____ Date _____

Residential Site Plan Instructions

Draw site plan on 8½" x 11" paper. For all items, note whether existing (e) or proposed (p). NOTE: The site plan must be complete and clearly legible.

Construction plans minimum preferred size 24"x36" (Scaled) NOTE: The plans must be clearly legible.

If a new septic system is proposed, the site plan must be prepared by a Certified Septic System Site Evaluator. Contact the Community Development Department, Planning, Zoning & Building Safety at (520) 432-9240 if you have questions or need assistance with your application.

Required for all residential permit applications

- _____ 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. Roads adjoining the property: name of road, surface material, distance from property line to edge of actual road
- _____ 7. Driveways: location, surface material, distance to closest property line
- _____ 8. Show direction of drainage on the property
- _____ 9. 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.
- _____ 10. Location, depth, and width of all drainageways or washes
- _____ 11. Distance from proposed structures to any drainageway or wash
- _____ 12. Distance from structures to all property lines and roads, and distance between residences on the subject parcel
- _____ 13. 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
- _____ 14. Direction of slope of land in area of proposed leach fields and expansion areas, indicate % slope
- _____ 15. Location, dimensions and height of all buildings, and their uses
- _____ 16. Location, height, length and material of walls and fences – for chainlink fences, note if slatted

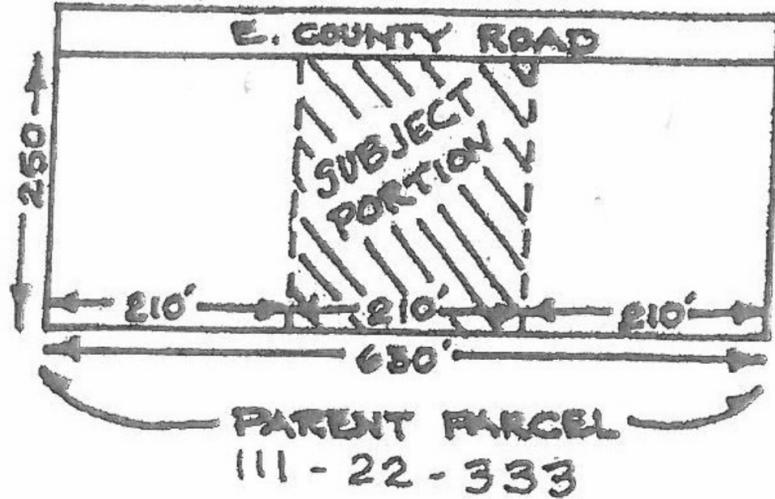
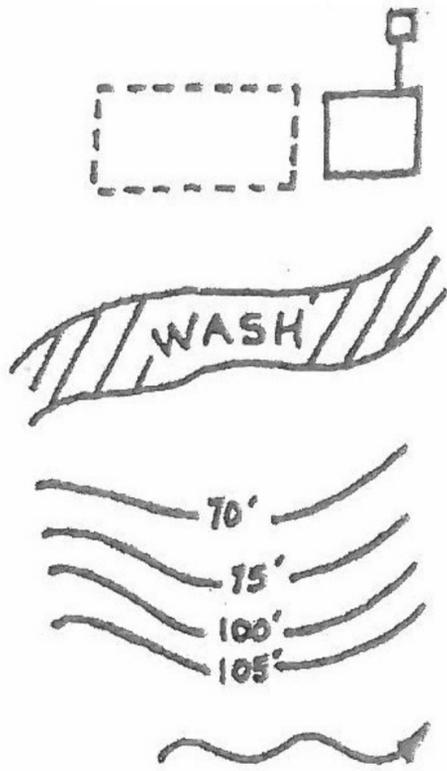
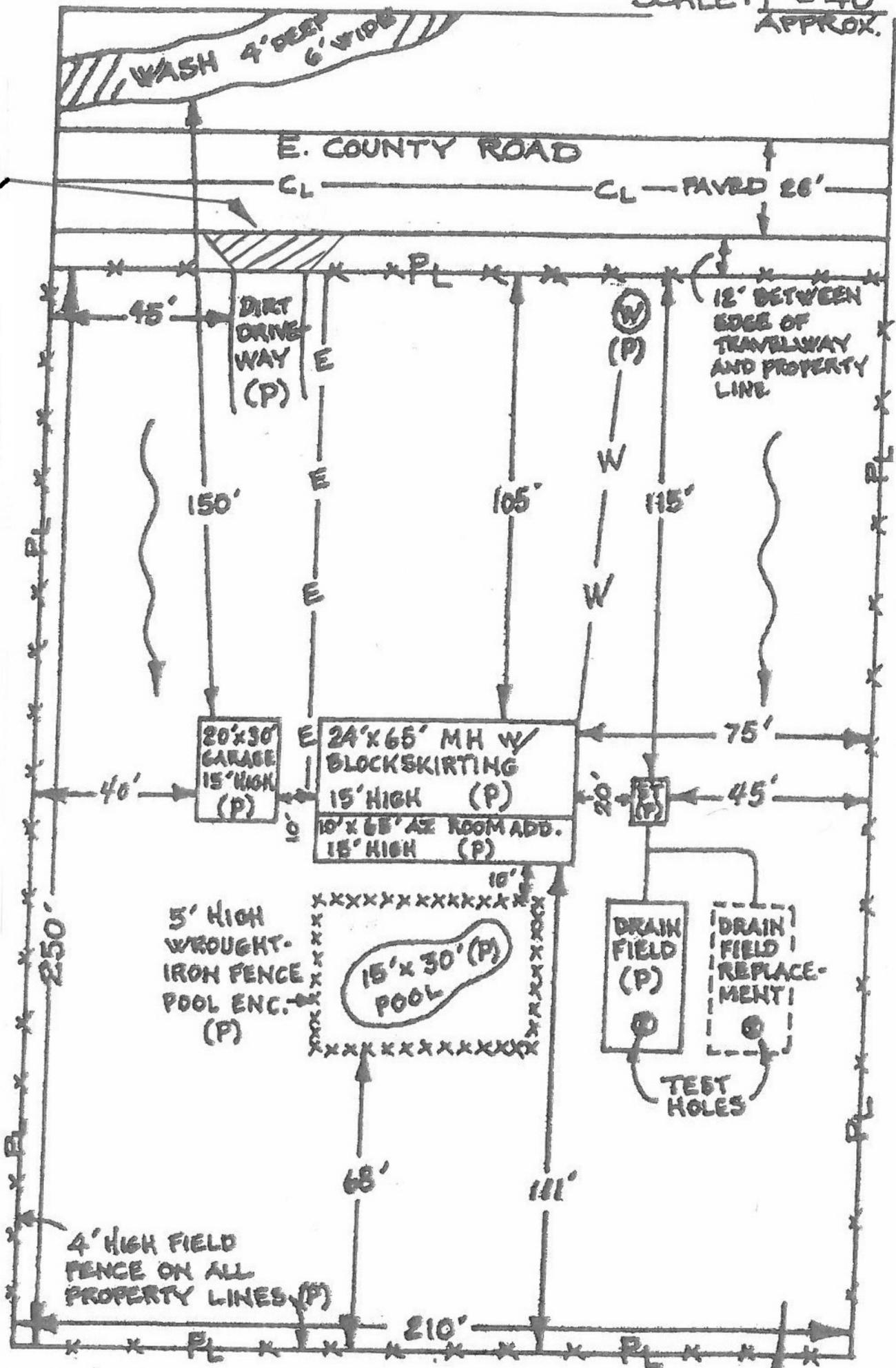
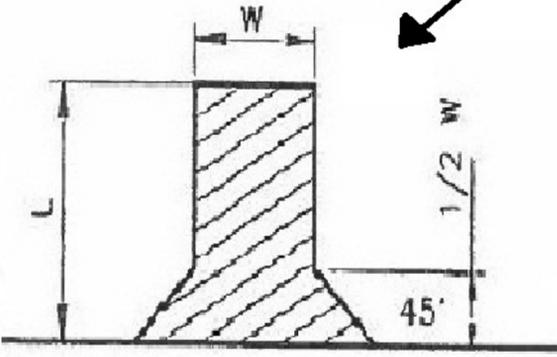
Required if applicable to your project

- _____ 17. If outdoor lighting is proposed, location, fixture type (such as 18 watt fluorescent, 75 watt incandescent, 250 watt low pressure sodium, etc.), shielding, and height of fixture
- _____ 18. If a new residence, a completed Lighting Worksheet is required
- _____ 19. If a mobile or manufactured home, show location and type of all accessories such as decks, awnings, skirting, etc. Construction plans and State approval are required for accessory structures
 - Block-skirting/Pumcrete state pre-approved plans may be used if not in a flood zone
 - Stone, Vinyl and Dura skirt do not need to submit plans if not in a flood zone
- _____ 20. If MH in a flood zone, follow OMH flood procedures (new installations only)
- _____ 21. If a solid fence or wall is proposed, distance from road surface (travelway) of all adjoining roads, speed limit of road (if posted) and distance to driveways on neighboring parcels within 20 feet of proposed wall
- _____ 22. If barn or shed is proposed, note if for animals, storage, or other use
- _____ 23. If a pool is proposed, pool size, location, setbacks to property lines; pool enclosure location, type, height. Type of pool cover? Required by 1820.01A of zoning regulations.
- _____ 24. If clearing (removing vegetation by scraping the land) more than 1 acre, show dimensions of area to be cleared, and proposed dust and erosion control measures
- _____ 25. If new SFR (site built only) on construction plans show the "Gray Water Plumbing" and "Hot Water on Demand" as required per Sierra Vista Sub-watershed Water Conservation Overlay Zone
- _____ 26. If new or replacement "Outdoor Sprinkler System" or "Evaporative Coolers" show compliance with Sierra Vista Sub-watershed Water Conservation Overlay Zone
- _____ 27. If a Solar Panel is proposed, installed only by a Licensed Contractor
- _____ 28. If a Wind Turbine is proposed, site plan required for roof mounted, disclosure statement required

(POR.)
 111-22-333
 Joe & Jane Smith

SCALE: 1" = 40'
 APPROX.

TURNOUTS





COCHISE COUNTY COMMUNITY DEVELOPMENT

"Public Programs...Personal Service"

To be submitted with permit submission

Supplemental Application – Manufactured Homes, Mobile Homes & Factory-Built Buildings

NOTE: The term *Mobile Home* refers to units built prior to June 15, 1976.

Applicant Information:

Applicant Name: _____
Mailing address _____
City/State/Zip _____
Phone Number _____

Proposed Installation Location:

Tax Parcel Number: _____
Property Address: _____
City/State/Zip: _____

Structure Information:

Unit Manufacturer: _____
Date Manufactured*: _____
Unit Size: _____
VIN/Serial Number: _____
HUD Number: _____

Dealer Information:

Dealer Name: _____
Mailing Address _____
City/State/Zip: _____
Phone Number: _____

Licensed Installer Information:

Unit Installer Name: _____
Mailing Address: _____
City/State/Zip: _____
License Number: _____ Class: _____
Business Phone Number: _____

Note any Accessory Structures associated with this permit request:

Awnings: _____
Skirting: _____
Porch or Deck _____
Garage: _____
Other: _____

Please list below all subcontractors associated with the installation of this Manufactured Home, Mobile Home or Factory-Built Building (Electrical, plumbing, mechanical, accessory structures, ect.):

Contractor Name: _____
License Number: _____ Class: _____
Type of Work: _____
Business Phone Number: _____

Continued - List of subcontractors associated with the installation:

Contractor Name: _____
License Number: _____ Class: _____
Type of Work: _____
Business Phone Number: _____

Contractor Name: _____
License Number: _____ Class: _____
Type of Work: _____
Business Phone Number: _____

Contractor Name: _____
License Number: _____ Class: _____
Type of Work: _____
Business Phone Number: _____

Contractor Name: _____
License Number: _____ Class: _____
Type of Work: _____
Business Phone Number: _____

*Complete only if Structure is constructed prior to June 15, 1976:

Date Mobile Home Manufactured: _____

Does the unit have a previously approved *Rehab Insignia* from the State of Arizona? Y or N

If "No" the unit must be rehabbed under the guidelines of the *Cochise County Rehabilitation Program*. A permit may be applied for both the Rehab and Installation of the unit concurrently.

Note: In ALL County unincorporated locations, other than Mobile Home Parks, all Mobile Homes constructed prior to June 15, 1976 must be rehabbed under the guidelines of the *Cochise County Rehabilitation Program*. Unless the unit has previously received a Rehab Insignia from the State.

Final occupancy approval of the *Mobile Home* will not be given until full compliance with all Zoning, Installation Requirements, and the Rehab has been completed by the State or County.

I certify this information is correct, and that any changes will require additional permit approval:

Applicant Signature: _____

Date: _____

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:

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

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

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

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

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:

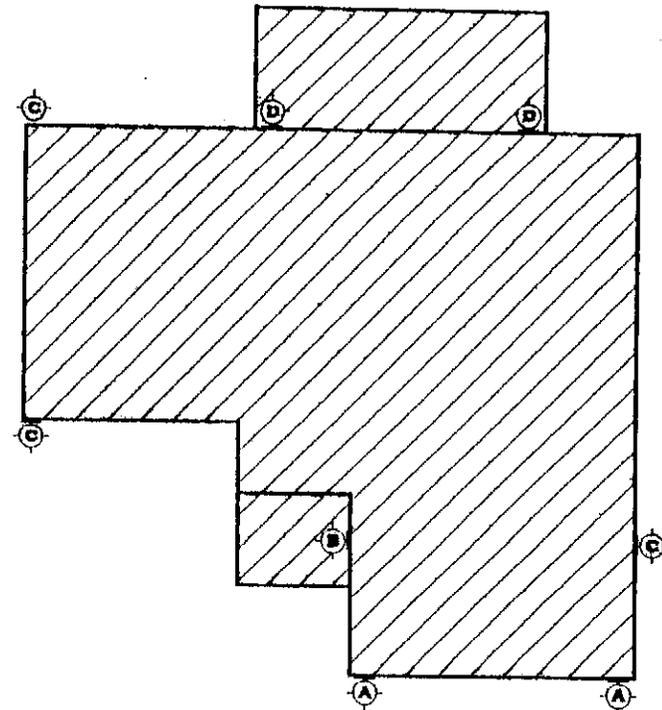
Signature: _____ Date: _____

Example

SAMPLE LIGHTING PLAN

RESIDENTIAL LIGHTING WORKSHEET

Fixture ID on Plans	Fixture Type and Wattage	No. of Fixtures	Height above Ground ¹	Lumens per Fixture	Total Lumens for Fixture Type
Existing					
<i>None</i>					
Subtotal					
Proposed					
A	60W. Incandescent	2		890	1780
B	18 W. Compact Fluoresc.	1		1200	1200
C	(2) 75W. PAR	3		1400	4200
D	75 W. Halogen	2		700	1400
Subtotal					8580
Grand Total					8580
Total Lumens <u>8580</u> Total project acreage (developed area) <u>1 acre</u>					
Lumens per acre permitted: <u>20,000</u>					
Lumens per acre proposed: <u>8580</u>					
Are all proposed fixtures fully shielded? <u>No</u>					
If no, identify which fixtures and exemption type <u>A - less than 1000 lumens</u>					
Notes: <u>C to be aimed half way between straight down and horizontal (45°)</u>					



Type A	Type B	Type C	Type D
			

¹ If pole mounted

LAMP DATA

Lamp Wattage	Initial Lumens
--------------	----------------

Lamp Wattage	Initial Lumens
--------------	----------------

Incandescent

25 W	150
40 W	460
60 W	890
75W	1210
100 W	1750
150 W	2880
300 W	6360
1000 W	23800

Metal Halide

175 W	14000
250 W	20000
400 W	40000
1000 W	115000

PAR (Parabolic Aluminized Floods & Spots)

150 W	1740
-------	------

Compact Fluorescent

5 W	250
7 W	400
13 W	900
18 W	1200
26 W	1800
32 W	2900

HPS (High Pressure Sodium)

50 W	3300
70 W	5800
100 W	9500
150 W	16000
200 W	22000
250 W	30000
310 W	37000
400 W	50000
1000 W	140000

Tungsten-Halogen

250 W	4700
500 W	10700
1000 W	19000
1500 W	36000

LPS (Low Pressure Sodium)

18 W	1800
35 W	4800
55 W	8000
90 W	13500
135 W	22500
180 W	33000

Mercury Vapor

100 W	4000
175 W	8500
400 W	23000
700 W	44000
1000 W	61000

Fluorescent (Standard Cool-White, 1.5-inch tubes)

21 W	1190
30 W	2050
36 W	2450
39 W	3000
50 W	3700
52 W	3900
55 W	4600
70 W	5400
75 W	6300

These are standard values are based on manufacturers data and are to be used unless the applicant submits other verified lumen values.



COCHISE COUNTY COMMUNITY DEVELOPMENT

"Public Programs...Personal Service"

Sierra Vista Sub-Watershed - Water Conservation Overlay Zone Permit Checklist

The following water conservation measures shall be required of all residential and non-residential properties in the Sierra Vista Sub-watershed, as defined by the Arizona Department of Water Resources and delineated on County maps:

Note: In order to obtain a Building Permit the required *Gray Water* appliances and plumbing system design with stub-outs must be shown on the construction plans and are verified during the inspection process.

RESIDENTIAL PERMITS ONLY:

Gray Water Plumbing: New residential construction shall have gray water line(s) plumbed to stub out, and to be capped and clearly marked so as to permit the optional use of gray water by residents. The gray water plumbing must connect at least two plumbing fixtures, and preferably those that produce the most gray water without compromising the efficient evacuation of the black water pipes.

Identify at least two plumbing fixtures proposed with plumbing for gray water outlets in proposed new construction (e.g. laundry room, downstairs bathroom sink, etc.):

Are *Gray Water* plumbing line(s) shown in construction plans? Yes

Note: *THIS ITEM DOES NOT APPLY TO MANUFACTURED OR REHABILITATED MOBILE HOMES*

RESIDENTIAL AND NON-RESIDENTIAL PERMITS:

Hot Water on Demand: In new construction, a hot water system will be installed to provide hot water on demand at the point of use in sinks and baths/showers. Recirculation devices shall include timers, temperature sensors or remote control operation. Point of use hot water heaters that serve individual fixtures or other alternatives that deliver hot water at each fixture within a waiting period of 15 seconds or less are acceptable.

Describe device(s) proposed to achieve hot water on demand at all sinks, baths or showers in proposed new construction:

Are Hot Water on Demand Device(s) shown in construction plans? Yes
Device Cut-Sheets Provided? Yes

Note: *THIS ITEM DOES NOT APPLY TO MANUFACTURED OR REHABILITATED MOBILE HOMES*

Outdoor Sprinkler Systems: Any new installation or replacement of an automatic outdoor sprinkler system shall also include the installation of a rain or humidity sensor that will override the irrigation cycle of the sprinkler system when rainfall has occurred in an amount sufficient to negate the need for irrigation at the scheduled time. Where there are multiple areas with a sprinkler system watered from one controller, the sensor must be installed at the largest area.

Does permit include any proposed automatic outdoor sprinkler systems? ____ Yes ____ No

If Yes, then system shall include rain or humidity sensors.

Is the *Outdoor Sprinkler System* depicted on Plans (site or construction)? ____ Yes ____ No

Evaporative Coolers: New or replacement evaporative coolers shall not be single-pass coolers.

Does permit propose any new or replacement of evaporative coolers? ____ Yes

If Yes, then evaporative coolers shall not be single-pass, i.e. non-re-circulating.

Evaporative Coolers depicted on Plans and Cut-Sheets provided (site or construction)? ____ Yes

NON-RESIDENTIAL PERMITS:

Commercial Laundry Facilities: Laundry facilities intended for public use such as laundromats, hotel guest laundries or multi-family housing laundry rooms will be equipped with high efficiency washing machines that have a water factor of 9.5 gallons per each cubic foot of laundry or less. This provision applies to initial establishment of new laundry facilities and on replacement of existing equipment due to normal wear and tear or other loss.

Non-residential only, if applicable, describe make and model of proposed high efficiency washing machines: _____

Are Equipment Cut-Sheets Provided? ____ Yes ____ N/A

Artificial Water Features: New artificial water features such as ponds, lakes, water courses, and other types of decorative water features are prohibited in any new commercial construction or in common user areas of multi-family housing unless their sole source is harvested rainwater. This provision does not pertain to required storm water detention/retention facilities or permitted swimming pools and spas.

Non-residential permits only: Any artificial water features proposed? ____ Yes (if yes, sole source is harvested rainwater? ____) or ____ None proposed

Are they depicted on Construction Plans (site or construction)? ____ Yes ____ N/A

Landscaping: Any new landscaping proposing irrigation installation or re-installation in a median or similar strip of permeable surface less than fifteen feet in any horizontal dimension, adjacent to a roadway, sidewalk, parking area or other paved or impermeable area, shall be irrigated by a subsurface (drip), non-sprinkling irrigation system.

Does permit propose any irrigated landscaped medians less than 15 feet wide? ____ Yes ____ No

If Yes, then system shall be irrigated by a subsurface (drip), non-sprinkling irrigation system.

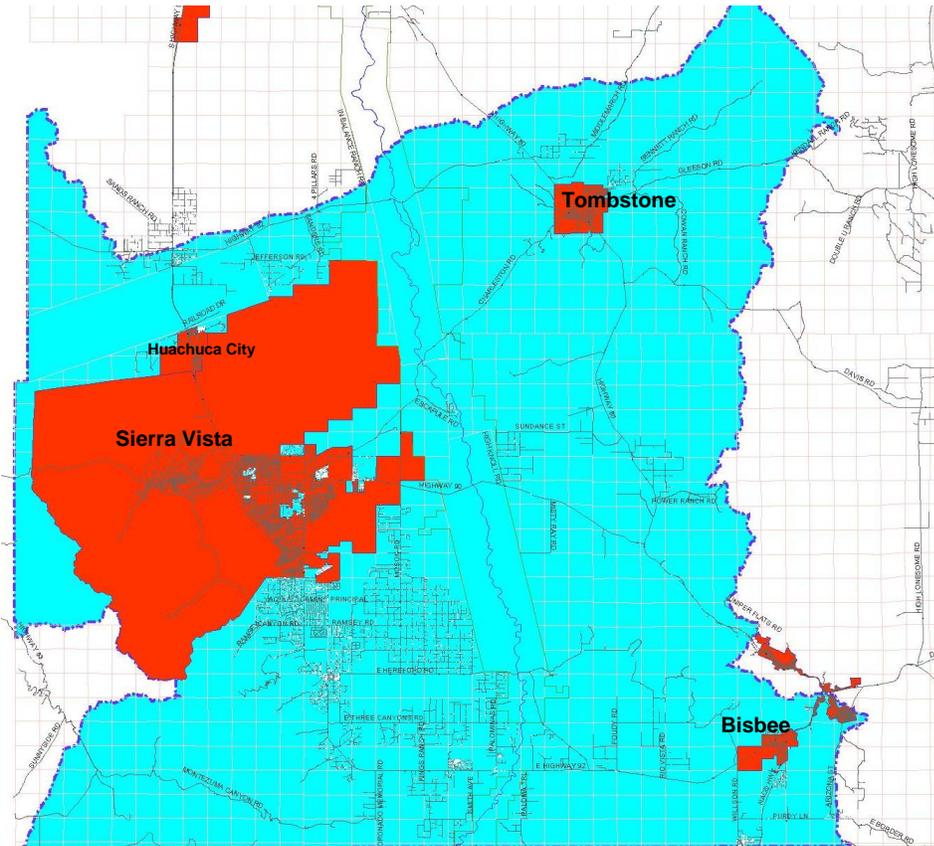
Are Landscaped Medians depicted on Plans (site or construction)? ____ Yes

By signing below, I (the applicant) hereby acknowledge that the information provided above is accurate and true, subject to minor revisions that are in conformance with the County's regulations as they relate to the requirements of the Sierra Vista Sub-Watershed Water Conservation Overlay District, and that said information may be verified through the County's building permit review and inspection process.

Applicant's Name (printed) and Signature

Date

Sierra Vista Sub-watershed



Incorporated City



**Sierra Vista
Sub-watershed**



Arizona Department of Agriculture (ADA)
Licensing and Registration Section
1688 West Adams, Phoenix, Arizona 85007
Phone: (602) 542-6408
Fax: (602) 542-0466

Notice of Intent to Clear Land

ARS § 3-904

Pursuant to A.R.S. § 3-904 the undersigned, as Owner of the Property described herein, gives this Notice of Intent to Clear Land of protected native plants.

1. **Owner/landowner's agent.** The owner or landowner's agent of the Property upon which protected native plants will be affected:

Owner's Name _____ Fax _____ Phone _____

Address _____

Agent's Name _____ Fax _____ Phone _____

Address _____

2. **Property.** The description and location of the Property upon which protected native plants will be affected:

County _____

Name of Property/Project _____

Address _____

Physical Location (attach map) _____

(Note: Map must also show surrounding land for 1/2 mile in each direction)

Tax Parcel ID Nos. _____

Legal Description (or attach copy) _____

Number of Acres to be Cleared _____

3. **Owner's Intent.** Landowner's intentions when clearing private land of protected native plants.

Owner intends to allow salvage of the plants, and agrees to be contacted by native plant salvagers.

Owner intends to transplant the plants onto the same property, or to another property he also owns.

Owner has already arranged for salvage of the plants.

Owner does not intend to allow salvage of the plants.

Other _____

4. **Approximate starting date.** _____

(See notice period listed on reverse side)

Signature _____ **Date** _____

Notice to salvagers: Consent of the landowner is required before entering any lands described in this notice.

Explanation Of This Form

1. Notice of Intent to Clear Land.

The majority of the desert plants fall into one of five groups specially protected from theft, vandalism or unnecessary destruction. They include all of the cacti, the unique plants like Ocotillo, and trees like Ironwood, Palo Verde and Mesquite. In most cases the destruction of these protected plants may be avoided if the private landowner gives prior notice to the Arizona Department of Agriculture.

2. Notice Period.

When properly completed, this form is to be sent to the Department within the time periods described below. Landowners/ developers are encouraged to salvage protected native plants whenever possible.

3. Information to Interested Parties.

The information in this notice will be posted in the applicable county office of the Department and mailed to those parties (salvage operators, revegetation experts) who have an interest in these plants and may approach the landowner with the possibility of saving the plant(s) from unnecessary destruction.

Notice to Landowner:

1. The owner may not begin destruction of protected native plants until he receives confirmation from the Arizona Department of Agriculture and the time prescribed below has elapsed. The "Confirmed" stamp only verifies that the Notice has been filed.

Size of area over which the Destruction of Plants will occur

Length of Notice Period

Less than one acre

20 days, oral or written

One acre or more, but less than 40 acres

30 days, written

40 acres or more

60 days, written

2. If you are clearing land over an area of less than one acre, oral notice may be given by calling the applicable county office at the telephone number given below.
3. If the land clearing or plant salvage does not occur within one year, a new Notice is required.
4. This Notice must be sent to the applicable district office of the Department of Agriculture at the address given below:

Kingman Area
Junction of Hwys 68 and 93
(928) 565-2222
Permits sold Mondays 8:00 a.m. - 10:00 a.m.

Phoenix Office
1688 W. Adams
Phoenix, AZ 85007
(602) 364 - 0935

San Simon area
Milepost 383.3 Westbound I-10
(520) 845-2437
Permits sold on Wednesdays 10:00 a.m. - 12:00 p.m.

Nogales Office
2771 N. Grand Ave.
Nogales, AZ 85621
(520) 281-0783

Tucson Office
400 W. Congress Ste.124
Tucson, AZ 85701
(520) 628-6317

Yuma Office
3893 S 4th Ave.
Yuma, AZ 85365
(928) 341-1680

Notice to salvagers: Consent of the landowner is required before entering any lands described in this notice.