

CITY OF BULLHEAD CITY DEVELOPMENT SERVICES 2355 TRANE RD

BULLHEAD CITY, AZ 86442

ZONING 928-763-0123 BUILDING 928-763-0124

FACTORY BUILT BUILDING INSTALLATION PERMIT APPLICATION

OWNER INFORMATION							
Name		Email Address					
Phone Number Mailing Address:		: (Please include City, State, Zip Code)					
INSTALLATION ADDRESS							
Address		City	State AZ		Zip Code		
UNIT INFORMATION							
Manufacturer	Serial N	umber	Mfg. Certificate Number	r Size		Occupancy Type	
Permanent (Building installed for I	nore than	n 6 months)	Temporary (Leased building installed for 6 months or less)				
Fire Sprinkler System N/A	Local	l fire authorit	y having jurisdiction:				
Fire Alarm System N/A			y having jurisdiction: _				
	Local	THE authority	y naving jurisdiction				
PROPERLY LICENSED ENTIT	TY(S) P	ERFORMIN	G WORK:				
Company Name		Email Address					
License Number	Number License Class		sification	Phon	Phone Number		
Address (Please include City, State, Zip Co	de)	'					
To add additional Insta	llers a	nd/or Contr	actors, please use	Subco	ontracto	r Supplement Form	
DEALER INFORMATION							
Company Name			Email Address				
License Number License Clas		ssification Phone Number					
Address (Please include City, State, Zip Code)							
PERMIT PURCHASER INFOR	MATIC	ON					
Applicant Name				Date	ate		
Email Address							
THIS SECTION IS FOR OFFICE USE ONLY							
Permit Number:			:				
			al #:				



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SUBCONTRACTOR SUPPLEMENT FORM

Please list all licensed subcontractors associated with the installation / accessory structures of the factory built-building /single family factory built-building (electrical, plumbing etc.).

Contractor's Company Name					
License Number	License Classification	Phone Number			
Email Address					
Check work being performed ELE	CTRIC PLUMBING GAS	MECHANICAL			
ACCESSORY STRUCTURE					
OTHER					
Contractor's Company Name					
License Number	License Classification	Phone Number			
Email Address					
Check work being performed ELE	CTRIC PLUMBING GAS	MECHANICAL			
☐ ACCESSORY STRUCTURE					
OTHER					
Contractor's Company Name					
License Number	License Classification	Phone Number			
Email Address					
Check work being performed _ ELE	CTRIC PLUMBING GAS	MECHANICAL			
ACCESSORY STRUCTURE					
OTHER					
Contractor's Company Name					
License Number	License Classification	Phone Number			
Email Address					
Check work being performed ELECTRIC PLUMBING GAS MECHANICAL					
ACCESSORY STRUCTURE					
OTHER					
It is the permit holder's responsibility to call for all required inspections: 928-763-0172					
THIS SECTION IS FOR OFFICE USE ONLY					
Permit Number:	Note/Comment:				



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BULLHEAD CITY, AZ 86442

PLANNING 928-763-0123 BUILDING 928-763-0124

REQUIRED SIGNATURES PAGE FOR: MANUFACTURED HOME, FACTORY BUILT BUILDING AND SPECIAL EVENT INSTALLATIONS

			1 ~		
APPLICANT NAME:			CITY LOG#:		
OWNER NAME:			CITY PERMIT#:		
INSTALLATION					
ADDRESS:					
Check	L				
One					
MANUFACTURED HOME					
FACTORY BUILT BUILDING -	FACTORY BUILT BUILDING -	FACTO	RY BUILT BUILDING -		
RESIDENTIAL	COMMERCIAL		AL EVENT		
Per ARS 9-495. Employees providing as	ssistance; identification; communication:				
A. In any written communication between	a city or town and a person, the city or town		lephone number and email address of	the employee who is authorized and	
able to provide information about the com- 1. Demands payment of a tax, fee, penalty,	munication if the communication does any of	f the following:			
2. Denies an application for a permit or lice					
	ional information or materials needed for appr	roval of any application for	r a permit, license or other authorizati	on that is issued by the city or town.	
	le to provide information about any communi-	cation that is described in	subsection A of this section shall reply	within five business days after the	
city or town receives that communication. Per ARS 9-834 Prohibited acts by muni	icipalities and employees; enforcement; no	tice:			
	ng decision in whole or in part on a licensing		may be enforced in a private civil action	on and relief may be awarded against a	
	ically authorized by statute, rule, ordinance or			y fees, damages and all fees associated	
	ot constitute a basis for imposing a licensing		application to a party that prevails in	an action against a	
condition.	rity specifically authorizes the requirement or		a violation of this section. employee may not intentionally or kno	wingly violate this section. A	
	cipality shall avoid duplication of other laws the		section is cause for disciplinary action		
	l avoid dual permitting to the maximum exten			-	
practicable.	al flavibility to issue licenses or adopt ordinar	adopted personr		lad by coction 12 820 01 or 12 820 02	
C. This section does not prohibit municipal flexibility to issue licenses or adopt ordinances or codes. G. This section does not abrogate the immunity provided by section 12-820.01 or I H. A municipality shall prominently print the provisions of subsections A, B, C, D					
	D. A municipality shall not request or initiate discussions with a person about waiving that G of this section on all license applications.				
Person's rights.		I. The licensing	application may be in either print or e	lectronic format.	
Warning - Plans Control: Once submitted to the City for review, per	rmits and their associated construction docume	ents are considered to belo	ong to the property owner, as recorded	with Mohave County at the	
	egardless of who is listed on this application a				
	not determine between competing interests wh	no has legal right to the per	rmit and associated construction docur	nents.	
Licensing Timelines:	60 working days consisting of: Up 15 working	a daye for administrative r	eview for application completeness. I	In to 45 working days for substantive	
	and Zoning Permits" guide far complete detail				
statute, ordinance code or policy statement	t impacting the application.			**	
Acknowledgement:	I have provided is correct and I agree to com	ambu swith all State Country	and City laws and andinonass mosulat	ing construction, and that I will	
	lication of the licensing and plans control pro-				
for reviewing compliance with any CC&R	R's that apply to the project; and that in my opi	inion no CC&R exists or a	applies or has been or will be complied	with. I understand and agree	
	n to explain every requirement and ordinance				
	ss to the property at all reasonable times to asc assed on plans, specifications and other data sh				
plans, specifications and other data, or preventing building operations when in violation of this code or of any State, County or City laws, rules or regulations.					
Required Signatures:					
Acquired Digitatures.					
Owner / Agent:	Date:	Applica	nt:	Date:	
By signing as 'A	Agent' I am signing on behalf of the o	owner and I have the	owner's permission and autho	rity to do so.	

OFFICE USE ONLY					
DESCRIPTION	IGA FEE	STORIES	LF	FEE TOTAL	
MH - MANUFACTURED HOME INSTALLATION	\$700.00 EACH				
FBB - RESIDENTIAL INSTALLATION	\$650.00 PER STORY				
FBB - COMMERCIAL INSTALLATION	\$7.00 PER LF, PER STORY				
FBB – CLASSROOM INSTALLATION	\$4.00 PER LF, PER STORY				
FBB - SPECIAL EVENT INSTALLATION	\$370.00 EACH				
INSTALLATION REINSPECTION OR ADDITIONAL INSPECTION NOT COVERED BY PERMIT	¢105.00 EACH				
EXTENSION – 6 MONTHS MH & FBB	\$185.00 EACH \$150.00 EACH				
EATENSION - 0 MONTHS MIT & FBB	\$150.00 EACH	TO	TAL DUE:		

	Reviewed By:	Date:
Submittal		
Approval		
Eff 07/01/2025		