

TOWN  
Of

PARADISE VALLEY



Plumbing Permit Application  
Community Development Department  
6401 E Lincoln Drive  
Paradise Valley, AZ 85253  
(480) 348-3692

**Plumbing Permit Application**

Date: \_\_\_\_\_ Application / Permit #: \_\_\_\_\_

**Job Site Information**

Address: \_\_\_\_\_ Hillside: (\_\_\_\_) Yes (\_\_\_\_) No  
Assessor Parcel Number (APN): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Zoning: \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_ Lot #: \_\_\_\_\_  
Property has: (\_\_\_\_) Stop Work Order?

**Owner Information**

check here if owner/builder

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address (if different): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Applicant Information**

Applicant's relationship to owner:  Agent  Architect/Designer  Contractor  Other: \_\_\_\_\_  
Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address (if different): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Contractor Information**

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
ROC License No.: \_\_\_\_\_ AZ Sales Tax ID: \_\_\_\_\_

I hereby certify that the above information is true and accurate. I further certify that I will comply with all Federal, State, County and Town laws relating to building construction.

**OWNER OR AUTHORIZED AGENT SIGNATURE**

No applications are accepted or permits issued after 3:30 PM. No service is available from 12:00 to 1:00 PM.

Specify work: \_\_\_\_\_  
\_\_\_\_\_

Fees: Permit ..... \$145.00

To tie into PV sewer, provide the water meter size \_\_\_\_\_ (This will determine the Sewer Development Fee)