

# Yavapai County Development Services

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Addressing – Building Safety – Customer Service & Permitting – Environmental – Land Use – Planning

## Environmental Unit Building Project Submittal-Chino Valley

<b>PROPERTY INFORMATION</b> Assessor's Parcel Number _____  ADDRESS _____  CITY _____  SUBD _____ LOT _____  Onsite Wastewater Treatment Facility (Septic) Permit Number: _____	<b>PROPERTY OWNER INFORMATION</b>  APPLICANT _____  ADDRESS _____  Owner <input type="checkbox"/> Agent <input type="checkbox"/> Contractor <input type="checkbox"/>  CONTACT PHONE _____  CONTACT EMAIL _____
<b>PROJECT DESCRIPTION (TYPE OF WORK TO BE DONE):</b> _____ _____ _____ _____	

### Minimum Submittal Requirements:

- Plot plan that includes:
  - 8 ½" X 11" format **only**
  - Onsite wastewater treatment facility (septic system)
  - Buildings
  - Wells
  - Dimensions
  - Assessor's Parcel Number
- Floor plan of all new and existing buildings with water using fixtures-
  - 8 ½" X 11" **only**
  - Assessor's Parcel Number



## Yavapai County Coordinated Permit Process Plot Plan Sketch and Affidavit

I certify that I am authorized by the property owner to make this application, that all information provided for this application is correct and that this plot plan, as part of the permit, indicates all structures (including fences, walls, and pads), correct property and building dimensions; setback distances; legal access and easements; road cuts; walls and/or any water course (including washes, drainage ditches etc.) on or within 50' ; 100' and 200' respectively of the property. We agree to conform to all applicable laws of this jurisdiction.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Area Map for parcels exceeding 2 acres or with dimensions over 300' .


Document #

Sec

Twn

Rng

A P N

**Must be drawn to scale per checklist on back of this form.**

Zoning: \_\_\_\_\_

Stories: \_\_\_\_\_

Height: \_\_\_\_\_

Slope: \_\_\_\_\_%

FY: \_\_\_\_\_

RY: \_\_\_\_\_

EY: \_\_\_\_\_

IY: \_\_\_\_\_

LC: \_\_\_\_\_

Lot Area \_\_\_\_\_

Lot % \_\_\_\_\_

Density Used: \_\_\_\_\_

Scale: \_\_\_\_\_

North Arrow

LAND USE  
APPROVAL BY:

DATE:

TOTAL SHIELDED LUMENS: