



**STATE OF ARIZONA  
DEPARTMENT OF HOUSING**

1110 W. WASHINGTON, SUITE 280  
PHOENIX, ARIZONA 85007  
OFFICE (602) 771-1000 FAX (602) 771-1002

**SPECIAL EVENT INSTALLATION PERMIT**

<b>SITE AND BUILDING INFORMATION:</b>			
<u>Owner Name</u>		<u>Mailing Address</u> (Please include City, State, Zip Code)	
<u>Installation Street Address</u> (Please include City, State, Zip Code)			<u>Event Date(s)</u>
<u>Manufacturer Name</u>	<u>Serial Number</u>	<u>Mfg. Certificate / Insignia Number</u>	<u>Unit Size</u>
<b>PROPERLY LICENSED ENTITY(S) PERFORMING WORK INFORMATION:</b>			
<u>Company Name</u>		<u>Mailing Address</u> (Please include City, State, Zip Code)	
<u>Phone Number</u>	<u>License Number</u>	<u>License Classification</u>	<u>Email Address</u>
<b>To Add Additional Installers and/or Contractors, please use Subcontractor Supplement Form</b>			
<u>Dealer Name</u>	<u>License Number</u>	<u>Dealer Mailing Address</u> (Please include City, State, Zip Code)	
<b>PERMIT PURCHASER INFORMATION:</b>			
<u>Applicant Name</u>		<u>Phone Number</u>	<u>Date Completed</u>
<u>Email Address</u> *Email address to whom electronic communication from the office will be sent		<u>Site Contact Name and Phone Number</u>	
<b>THIS PERMIT DOES NOT ALLOW BUILDING TO BE USED FOR GENERAL PUBLIC ADMITTANCE AND USAGE.</b>			
<b>THIS SECTION IS FOR OFFICE USE ONLY</b>			
<b>Permit Number:</b>		<b>Permit Fee:</b>	<b>Check #</b>
		<b>Issue Date:</b>	<b>Receipt #</b>
		<b>Issued By:</b>	
<b>Inspection Type</b>	<b>Inspection Date</b>	<b>Inspector's Sign-Off</b>	<b>NOTES</b>
ELECTRICAL			
This certifies that this building has been inspected for compliance with the requirements of the code and the use for which the proposed occupancy is classified. Signed Inspector : _____ Date: _____			

**THIS PERMIT IS GOOD FOR 45 DAYS FROM DATE OF PURCHASE**

**BUILDING MAY NOT BE OCCUPIED UNTIL ALL REQUIRED INSPECTIONS HAVE BEEN PERFORMED AND APPROVED  
IT IS THE RESPONSIBILITY OF THE OWNER, DEALER OR INSTALLER/CONTRACTOR TO CALL  
FOR ALL REQUIRED INSPECTIONS AND REINSPECTIONS  
DISPLAY IN FRONT WINDOW FOR INSPECTION**



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[www.azhousing.gov](http://www.azhousing.gov)

## SPECIAL EVENT INSTALLATION PERMIT APPLICATION

### 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  ELECTRIC  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

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ACCESSORY STRUCTURE \_\_\_\_\_

OTHER \_\_\_\_\_

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Note/Comment: