

**TOWN OF PARADISE VALLEY
BUILDING DEPARTMENT
POOL AND/OR SPA PERMIT APPLICATION**

DATE: _____ Is this a Hillside lot? Yes _____ No _____

Owner: _____

Job Site Address: _____

Subdivision Name and Lot No. _____

TAX ASSESSOR _____ Book (_____) Map (_____) Parcel (_____)

Owner's Mailing Address, If Different: _____

Owner's Phone: Bus.(_____) Home (_____)

Contractor's Name: _____

Contractor's Address: _____

City _____ State _____ Zip _____

Phone: (_____) Contact Name: _____

E-Mail Address: _____

R.O.C. License No.: _____ Sales Tax No.: _____

I, the contractor, on behalf of the owner of the property, or owner/builder of this project, attest all information to be true and accurate.

CONTRACTOR SIGNATURE

OWNER/BUILDER SIGNATURE

(Written authorization from owner required if value exceeds \$25,000.)

1. Grading Work: _____ Cubic Yards of Cut _____ Cubic Yards of Fill

2. Type of Improvement: (_____) Pool (_____) Spa (_____) Other _____

S.F of Improvement(s): _____ VALUE OF PROJECT \$ _____

PLAN REVIEW FEE: \$ _____ PERMIT FEE: \$ _____

NOTE: Submit two sets of plans including: (A) Scaled plot plan showing setbacks of the pool to property lines, and all P.U.E. easements, **all washes, drainageways, drainage easements**, and utility lines; (B) Dimensions of the pool; (C) Details of any decorative features, i.e. waterfall, water/rock features and slides; (D) Two sets of engineering calcs & plans (stamped for the current year).

ZONING: _____ SETBACKS: _____
Front Rear Side Side

Reviewed By: _____

STAFF USE ONLY: Hillside Approval: _____ Date: _____ Review Fee: _____
Final Inspection Required: Yes / No Assurance Required: Yes / No Assurance Amount _____



Dust Control Plan

(for disturbed areas up to 4,356 square feet*)

Date: _____ Address: _____

Choose at least one measure per (lettered) category. (Must be done for the life of the project.)

EARTHMOVING

(It is always an option to cease operations to prevent dust.)

A) Grading / Demolition / Landscaping / Weed Control:

- Conduct watering as necessary to minimize visible emissions *(increase frequency in high winds)*.
- Thoroughly wet the site to the depth of any cuts.

B) Trenching / Screening / Backfilling:

- Mist dust cloud resulting from trenching *(increase frequency in high winds)*.
- Mist material after it drops from screen *(increase frequency in high winds)*.
- Use water truck or large hose dedicated to trenching & backfilling operations.

SITE STABILIZATION / DISTURBED SURFACE AREA

A) Temporary Stabilization: *(Including weekends & holidays)*

- Water all areas at least twice a day until a crusted surface is formed.
- Apply chemical stabilizers.
- Additionally use wind fences / barriers / berms *(not allowed as a primary measure)*.

When active operations will not occur for more than 15 days:

- Apply dust suppressants to all disturbed areas to maintain stabilization.
- Water all areas at least twice a day until a crusted surface is formed.
- Additionally install temporary coverings / enclosures *(not allowed as a primary measure)*.

B) Final Stabilization: *Within 8 months after active operations have ceased:*

- Pave the affected area. Stabilize with gravel and/or recycled asphalt. Stabilize with vegetation.

C) Open Storage Piles:

- Apply chemical stabilizers.
- Apply water to the surface of areas of all open storage piles on a daily basis.
- Additionally install temporary coverings / enclosures *(not allowed as a primary measure)*.

MATERIALS HANDLING / HAULING

A) Materials Handling:

- Thoroughly wet material prior to handling or loading.
- Water and/or mist material while loading to minimize visible emissions.

B) Hauling: All haul trucks must be effectively covered with a tarp or other suitable enclosure.

ROADWAYS / ACCESS POINTS

A) Unpaved haul / access roads / equipment paths: *Restrict vehicle speed to 15 mph.*

- Stabilize with gravel and/or recycled asphalt.
- Apply chemical dust suppressants to maintain surface stabilization.
- Water all surfaces as needed to minimize visible emissions.

B) Access Points: *Vacuum or wet broom daily all dirt or mud on paved road.*

- Install a stabilized construction entrance / coarse gravel pad *(Required if any hauling on or off site)*.
- Install a wheel washer.
- Limit, restrict and/or reroute motor vehicle access.

WATER SUPPLY

A) Availability: Water storage tank Metered hydrant Hose bibb Other: _____

B) Application: By water truck(s) # _____ gal/truck _____ By hoses By sprinklers

I hereby certify that I am familiar with the operations presented above and agree to conduct all operations in compliance with the above, with Maricopa County Rule 310 and with all applicable environmental regulations.

OWNER OR AUTHORIZED AGENT SIGNATURE

Printed Name & Title

*For disturbed areas greater than 4,356 sf (1/10th of an acre) a Maricopa County Earthmoving Permit is required.



Authorization Letter

An Authorization Letter is required when the work is valued at \$25,000 or more and the owner wishes to use an agent.

Date: _____

Owner's Name: _____

Owner's Address: _____

Agent's Name: _____

Agent's company name (if applicable): _____

- Type of construction:
- | | |
|---|---|
| <input type="checkbox"/> Single Family Residence | <input type="checkbox"/> Guest House |
| <input type="checkbox"/> Detached Accessory Structure | <input type="checkbox"/> Remodel |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Retaining Wall |
| <input type="checkbox"/> Swimming Pool (> 18" deep) | <input type="checkbox"/> Spa |
| <input type="checkbox"/> Pond (< 18" deep) | |
| <input type="checkbox"/> Water Fountain | <input type="checkbox"/> Water Feature |
| <input type="checkbox"/> Mailbox | |
| <input type="checkbox"/> Barbeque | <input type="checkbox"/> Bench Seat |
| <input type="checkbox"/> Fireplace | <input type="checkbox"/> Firepit |
| <input type="checkbox"/> Tennis Court | <input type="checkbox"/> Batting Cage |
| <input type="checkbox"/> Basketball Hoop Stanchion | |
| <input type="checkbox"/> Other: _____ | |

I hereby certify that the above information is true and accurate. I further certify that I authorize the agent named above to obtain demolition and/or building permit(s) on my behalf for the work specified above.

OWNER'S SIGNATURE

PARADISE VALLEY CONSTRUCTION SITE SECURITY CHECKLIST

This Construction Security Awareness Checklist is designed to help construction contractors and owners conduct a crime-risk awareness assessment for construction job sites to minimize and avoid thefts in neighborhoods. To enhance communications and foster better relations, a Paradise Valley Police Officer is available to review this checklist with the construction site contractor and manager, if desired.

If you have questions, please do not hesitate to call Community Resource Officer at 480-948-7418 or you can email CRO@paradisevalleyaz.gov. After receiving this checklist from Building Department, the Community Resource Officer will provide a copy to the Officer in the designated area. If there is an emergency, please dial 911. If it is a non-emergency, please dial 480-948-7418 at the Paradise Valley Police Department.

You are not expected to answer every question Yes. If the information does not exist or the Crime Prevention Coordinator has not completed the item or is not able to do so, just mark "No." This is an awareness checklist to help reduce crime on a jobsite, but it does not mean that every single item below needs to be checked "Yes" in order to begin work.

Thank you very much for partnering with the Town of Paradise Valley Police Department in keeping the Community a safer place, discouraging theft and individuals who will be looking for items to steal, and helping General Contractors and Subcontractors reduce theft of equipment and materials.

CONSTRUCTION SITE SECURITY CHECKLIST		
NO.	TOPIC	RESPONSE
	CRIME PREVENTION COORDINATOR ("CPC")	
1.	Please identify your construction site CPC and provide contact info. Name/Title of Crime Prevention Coordinator: _____ Job Site Address: _____ Email Address: _____ Cell #: _____ Work #: _____ Permit #: _____	Yes _____ No _____
2.	Is there a company contact for after hours? If other than CPC, please provide name and cell number: _____	Yes _____ No _____
3.	Is there a written job site security plan or checklist in place?	Yes _____ No _____
4.	Has the HOA or adjacent residents been included in the security plan or checklist?	Yes _____ No _____
5.	Does the CPC have contact information for the HOA or adjacent residents?	Yes _____ No _____
6.	Has the CPC completed crime prevention awareness training with the subcontractors and employees of the contractor?	Yes _____ No _____
7.	Did the CPC remind all employees of the subcontractors and general contractor to remind them that if they " See Something " they should " Say Something ?" and to call 911 or 480-948-7418 for non-emergencies.	Yes _____ No _____
	ASSET, PROPERTY IDENTIFICATION AND CAMERAS	
8.	Are all assets on the site engraved or marked? Items can be engraved with logos or names or even spray paint of a distinct color. Valuable equipment should be marked in hidden locations.	Yes _____ No _____
9.	Have you and your subcontractors and their employees photographed, recorded serial numbers, marked, and inventoried company and personal equipment?	Yes _____ No _____

10.	Are signs posted that state that all assets are marked and inventoried?	Yes _____ No _____
11.	Are cameras installed?	
12.	If cameras are installed, do you have notices posted that security cameras are watching the construction site?	Yes _____ No _____
INVENTORY CONTROL		
13.	Are materials and equipment checked frequently to ensure they have not been stolen or misplaced?	Yes _____ No _____
14.	Are deliveries of supplies or materials logged?	Yes _____ No _____
15.	Will appliance delivery be delayed until the structure can be locked?	Yes _____ No _____
16.	Are delivery vendors all identified and recorded by the construction site contractor? (eg, photo of license plate)	Yes _____ No _____
KEYS OR CODES		
17.	Are keys or codes issued only to those that need them, and a record maintained of those who have been assigned or provided keys or codes?	Yes _____ No _____
18.	Are all unused keys or codes secured?	Yes _____ No _____
19.	Have key or code control numbers been removed from padlocks or other locking devices?	Yes _____ No _____
20.	Have all employees of the general contractor and subcontractors been reminded to lock tool boxes and remove keys or codes?	Yes _____ No _____
21.	Do you have a Knox box or similar device so that first responders have access to the site in the event it is locked?	Yes _____ No _____
SITE SECURITY		
22.	Is perimeter fencing installed according to Town Code?	Yes _____ No _____
23.	Is the fence or other secured device around the perimeter inspected regularly?	Yes _____ No _____
24.	Are access points to the job site limited and secured?	Yes _____ No _____
25.	Is there a gate code? Is there an alarm? <u>Gate Code or other Locking Device Contact Information in the Event the Alarm Goes Off:</u> Name of Company or Person in charge of gates or codes: _____ Email Address: _____ Cell Number: _____ Work Number: _____	Yes _____ No _____ Yes _____ No _____
26.	Are "NO TRESPASSING" signs displayed in a prominent place on the fencing or on the perimeter of the construction site?	Yes _____ No _____
27.	Are there secured areas provided for tools and equipment?	Yes _____ No _____
28.	Are there GPS devices on any of the equipment, tools, or vehicles?	Yes _____ No _____
29.	Are there motion detection lights used on the construction site?	Yes _____ No _____

Thank you for your efforts to keep Paradise Valley safe and reduce thefts!