



TOWN OF DEWEY-HUMBOLDT
P.O. BOX 69
HUMBOLDT, AZ 86329
Phone 928-632-8643 ▪ Fax 928-632-7365
www.dewey-humboldt.net

OVER-THE-COUNTER PERMIT

Permit #: _____

Owner Name: _____ Phone: _____

Mailing Address: _____

Property Address: _____ Parcel: _____

Contractor Name: _____ License #: _____

Contractor Address: _____ Phone: _____

Permit Type: Demolition Residential Commercial Building
 Electrical Mechanical Plumbing Grading
 Other Describe: _____

Please describe the work to be done: _____

Fees:	Base Fee:	\$ _____
	Other Fees:	\$ _____
		\$ _____
	Subtotal:	\$ _____
	Total:	\$ _____

Permit issued by: _____ Receipt #: _____ Date: _____

BY SIGNING BELOW I AGREE:

- To abide by applicable code and Town Ordinance requirements.
- To have all work inspected and approved prior to being covered.
- To call 928-632-8643 the day before an inspection is needed.

Owner/Contractor: _____ Date: _____

Inspected and approved by: _____ Date: _____

Inspected and approved by: _____ Date: _____

Inspected and approved by: _____ Date: _____