COMMUNITY DEVELOPMENT DEPARTMENT

INVESTIGATION REQUEST FORM

PLEASE PRINT

TOWN OF CLARKDALE
39 N. Ninth Street
Clarkdale, AZ 86324
(928) 639-2400

Please mail or email completed form to:
PO Box 308, Clarkdale, AZ 86324 or
Paul.Grasso@Clarkdale.AZ.gov

FEE CHARGED: _________________

STAFF USE ONLY

Date Received: __________________
By: ____________________________

INFORMATION

PERMIT # _______________ DATE OF REQUEST ___________________

PROPERTY ADDRESS ___________________________________________ PARCEL # ________________________

PROPERTY OWNER NAME ____________________________________

PROJECT INFORMATION _______________________________________


AUTHORIZATION FOR INSPECTION

AUTHORIZED AGENT NAME _________________________________

COMPANY ____________________________________________

AUTHORIZED AGENT SIGNATURE ___________________ DATE __________

INSPECTION FEE: $78 PER HOUR, MINIMUM TWO HOURS

OFFICE USE ONLY

SCHEDULED DATE & TIME OF INSPECTION __________________________

INSPECTION CONDUCTED BY ________________________________

INSPECTION RESULTS ________________________________________

REINSPECTION REQUIRED? □ YES □ NO

FEE CHARGED: _________________

INSPECTION APPROVAL

TOWN OF CLARKDALE REPRESENTATIVE ___________________ DATE ________

AUTHORIZED FIELD REPRESENTATIVE ___________________ DATE ________

COMPANY _____________________________________________

Rev. 08-31-16