



**Community Development Services  
Division**

16000 N. Civic Center Plaza  
Surprise, AZ 85374  
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## **RESIDENTIAL LATH-STUCCO SYSTEMS SUBMITTAL AND INSPECTION REQUIREMENTS**

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## **RESIDENTIAL LATH-STUCCO SYSTEMS PERMIT APPLICATION SUBMITTAL AND INSPECTION REQUIREMENTS**

### **Submittal Requirements:**

Applicants of all residential structures shall provide the following:

- Provide 2 copies or one PDF set of the site plan for the address where the work will be completed. The plan shall indicate which exterior surfaces will be part of the work.
- Provide the ICC-ES report number for the system in use.
- Provide 2 copies or one PDF set of a wall detail that shows the layers and elements of the lath-stucco system including the weep screed and weep screed clearance. (see Exhibit A)

Applicants of residential manufactured homes shall also provide the following:

- Signed and sealed documentation from the engineer for the manufacturer of the home stating the current structural elements are adequate for existing loads and the new loads imposed by the lath-stucco system

OR

- A signed and sealed analysis from a State of Arizona registered structural engineer providing details for the structural elements and the lath-stucco system.

### **Inspection Requirements:**

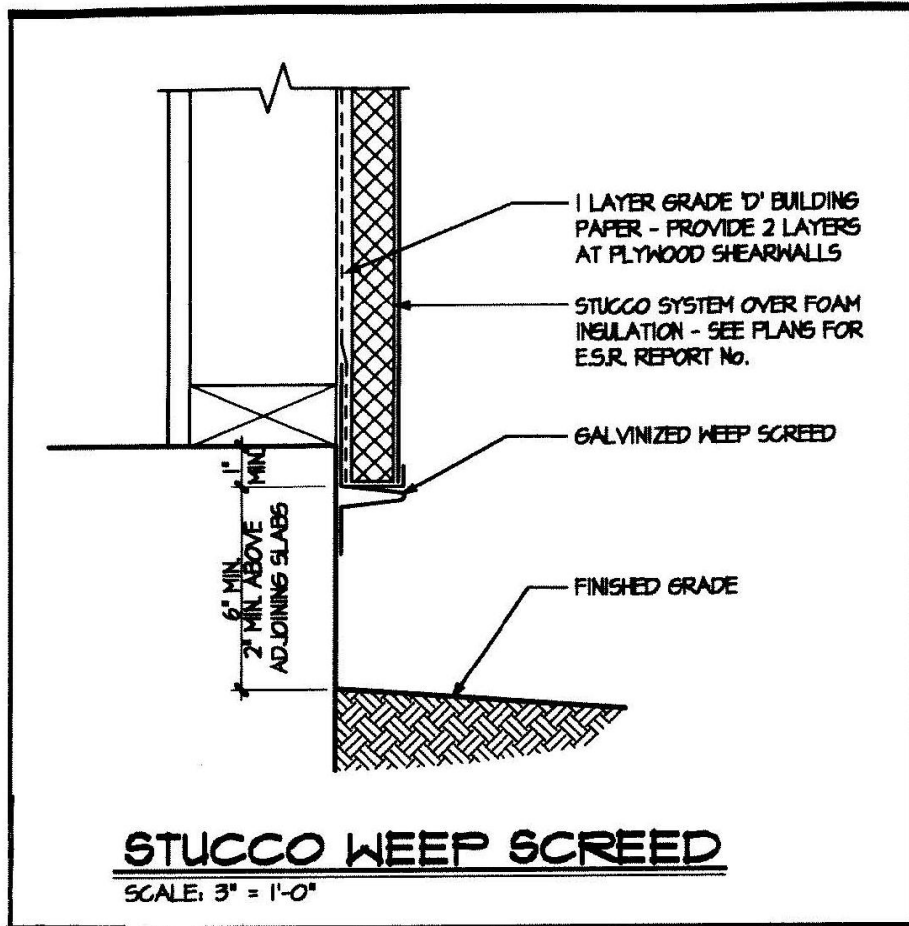
- If any upgrades to the structural elements are required by the engineer of record, the permit holder will have those items completed and call for the 521 – Strap and Shear Inspection.
- The lath system shall be installed per the manufacturer's specifications and the ICC-ES report for the specified system. When completed, the permit holder will call for a 541-Lath Nail Inspection.
- After the stucco system has been applied per the manufacturer's specifications and the ICC-ES report requirements, the permit holder will call for a 587 – Final Other Inspection. The permit holder must present the completed installation card to the inspector per the ICC-ES report specifications.

**A floodplain use permit may be required for properties located within a floodplain.**

**Please contact Maricopa County Flood Control District for more information.**

SURPRISE COMMUNITY DEVELOPMENT

16000 N. Civic Center Plaza, Surprise, Arizona 85374 623.222.3000 Fax 623.222.3001 TTY 623.222.1002



# Exhibit A

## Example Only



Community Development
16000 N. Civic Center Plaza
Surprise, AZ 85374
Ph 623-222-3000
Fax 623-222-3001
TTY 623-222-1002

Permit/Plan Review Application

Request:

Description of Request:
Project Valuation:

Property Information:

Property Address:
Property Location:
Parcel Number: Lot Number:
Subdivision Name: MCR:
Business Name:

Property Owner Information:

Name:
Address:
City: State: ZIP:
Phone: Alternate: E-mail:

Check here if proposed construction will be owner/builder (Residential projects only) [ ]

Property Owner and Applicant Authorization:

The owner or authorized agent for the owner of the subject lot or parcel guarantees the information and plans provided are correct to the best of their knowledge including recorded lot dimensions and structure locations.

Owner/Agent Printed Name Date Owner/Agent Signature Date

Internal Use Only
Received By: Date:
Permit Number:



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**Contractor and Contact Supplemental**

**Contractor Information:**

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 ROC License Number: \_\_\_\_\_ Business License Number: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Project Valuation: \_\_\_\_\_

**One-Time Bond Acknowledgement:**

Depending on your project type and valuation you may be required to obtain a one-time bond exemption certificate from the Arizona Department of Revenue. Consult your tax advisor regarding this requirement. City staff cannot answer tax questions or offer tax advice. For additional guidance, please contact AZDOR at (602) 716-6056.

Sign here acknowledging you have read and understand this statement.

<b>Contractor Printed Name</b>	<b>Date</b>	<b>Contractor Signature</b>	<b>Date</b>

**Primary Contact:**

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Alternate Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Company Name: \_\_\_\_\_

<b>Internal Use Only</b>	
Received By: _____	Date: _____
Permit Number: _____	