



Santa Fe County Building & Development Services

Fence & Walls (Above 6 Feet)

**** Submittals by appointment only ****

Forms in the packet to be completed

- Santa Fe County Development Application (Filled out & signed)
- Multi-Purpose State Building Application (Filled out & signed)

Documents applicants to provide

- Recorded Warranty Deed (Available in Santa Fe County Clerk's Office)
Letter of consent needed from property owner if leasing or on real estate contract. Phone # 505-986-6280
- Approved Survey Plat (Available in Santa Fe County Clerk's Office)
Phone # 505-986-6280
- Proof of Taxes Paid (Available in Santa Fe County Treasurers Office)
Tax Bills Will Not Be Accepted Phone # 505-986-6245
- Approved Emergency 911 Assigned Address Form
(Rural Addressing Department) **Phone # 505-995-2732**

Plans applicant to provide

4 Copies, 11" x 17" to scale

- Site Plan
(Birds eye-view of what is on the property including all existing & proposed structures, well, septic, driveway length and width).
Plans labeled with studio, casita, or guest house will not be accepted. Survey plats will not be accepted as site plans.
- Vicinity Map
- Retaining Wall (detail & sections, if applicable. Retaining walls 4' & over need to be stamped by a Professional Engineer)**
- Wall Sections
- Elevations (showing natural & final cut grade)
- Applicant must provide proof of permit or legal non-conforming status of all existing structures/improvements on property prior to submitting permit.

Helpful Hints

- ✓ No permits are required for fences & walls 6 feet and under.
- ✓ Provide the properties gate code on the development application so the Code Enforcement Officers can access the property.
- ✓ Please let our office know if you have loose dogs in your yard prior to inspection.
- ✓ Elevations should be dimensioned & show natural, finished & final cut grade.
- ✓ Height is taken from the lowest point.

DEVELOPMENT PERMIT PROCESS*

1. Call the SFC Land Use Office at 505-986-6225 to schedule an appointment to submit permit.
2. Submit all required checklist documents & staff will verify completeness. Incomplete submittals will not be accepted.
3. Staff reviews application & distributes to outside reviewing agencies (Fire, Utilities, Public Works & other agencies as needed). Staff also conducts a site visit.
4. Once reviews are complete, staff may provide applicant comments & revisions (redlines) to meet code requirements. The applicant reviews comments & revisions, makes needed changes & resubmits plans.
5. If application meets code requirements, a Development Permit is issued. The applicant then delivers approved, sealed plans to the NM Construction Industry Division (CID) for building permit.

- Forms included in packet
- Documents available at Santa Fe County
- Documents applicant to provide
- Plans applicant to provide

<p style="text-align: center;"><u>Notes</u></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p style="text-align: center;"><u>Notes</u></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p style="text-align: center;"><u>SLDC Regulations</u></p> <p>Zoning _____</p> <p>Community Overlay District _____</p> <p>Density _____</p> <p>Maximum height _____</p> <p>Accessory Dwelling Unit _____</p> <p>Setback from Front property line _____</p> <p>Setback from side & rear property line _____</p> <p>Flood Zone Setback _____</p>	<p style="text-align: center;"><u>Important Phone Numbers</u></p> <ul style="list-style-type: none"> Santa Fe County Land Use, 100 Catron St, STE 2102 505-986-6225 http://www.santafecountynm.gov State Engineers Office, 407 Galisteo Bataan Memorial Building 505-827-6175 (Well Permit) State Environment Department 2540 Camino Edward Ortiz, 505-827-1840 (Septic Permit) Santa Fe County Fire Prevention 4 Fire Place, 505-995-6523 Construction Industries Division (CID) 2550 Cerrillos Road, 505-476-4700 Santa Fe County Utilities, 505-992-9870 Manufactured Housing Division, 505-476-4770



**BUILDING AND DEVELOPMENT SERVICES AND
SANTA FE COUNTY FIRE PREVENTION DIVISION
DEVELOPMENT PERMIT APPLICATION**



Applicant Name: (Present &/or Former Names) _____ **Development Permit Number** _____ **Project Manager/Type/Date Received** _____

Development Fees Paid Y N Amount: _____ Fire Impact Fee Paid Y N Amount: _____ Total Fees Paid: _____
(Additional Fire Inspections will be charged a minimum \$25.00 fee)

For official use only

Type of Development Permit:
(Indicate all that apply)

Site Dev. Plan Conceptual Plan Conceptual Use Residential Bldg. Plan Commercial Bldg. Plan Accessory Structure Driveway
 Lot Line Adj. Summary Rev Sub. Major Sub. Minor Sub. Com. Sub. Sprinkler/Alarm Mobile Home Solar Other _____

Wildland Hazard Rating: Moderate High Very High Extreme N/A Fire District _____

Fire Protection Water Source: Fire Hydrant Draft Hydrant Pond Other _____ Driveway length: _____ Width: _____

PROPERTY OWNER INFORMATION: First Name: _____ Last Name: _____

Mailing Address: _____ Zip: _____

Rural address of Project: _____ Zip: _____

Written Directions to Project Site: _____

Gate Code _____

Cell Phone: _____ Home Phone: _____ Email address: _____

Contractor / Company Name: _____ Address: _____

Cell Phone: (____) _____ - _____ Work Phone (____) _____ - _____ Contractor's License # _____

PROJECT DESCRIPTION: _____

Section: _____ Township: _____ Range: _____ Commission District _____ Parcel ID: _____

UPC Number: _____ Plat Book: _____ Page: _____ Date Recorded: _____

Warranty Deed Instrument #: _____ Date Recorded: _____ Subdivision Name: _____ Overlay Dis: _____

Acreage: _____ Estimated Completion Date: _____ Valuation: _____

Proposed Number of Dwellings Onsite: _____ Existing: _____ Total: _____

Proposed Number of Lots Onsite: _____ Existing: _____ Total: _____

Proposed Roofed Area Sq. Ft.: _____ Existing Roofed Area Sq. Ft. : _____ Total Roofed Area Sq. Ft: _____

Lot Number: _____ Phase: _____ Affordable Unit: Yes No All Weather Access: Yes No* (*Access improvements required)

County Road: Yes* No (Access Permit DPW required) Legal Access: Yes No

FEMA 100-year floodplain: Yes* No Zone _____ Panel Number: _____ D (*Floodplain Dev. Permit required)

NMED Septic Permit: Yes No Community Sewer System Yes No Water Restrictions: Yes* No Book _____ Page _____

Shared Well: Yes* No *Share Agreement Inst. # _____ Well Meter Reading: _____

Well Permit # _____ Well Meter Serial Number: _____ Meter Type _____ Unit of Measure: _____

Community Water System: Yes* No (* Water Service Letter Required) Cistern Required: Yes No Rain barrels Required: Yes No

Proof of Taxes: Yes No (SLDC Zoning): A/R RUR RUR-F RUR-R RES-F RES-E RES-C TC CN CG IL I MU PD

Owner Acknowledgment or Authorized Representative: Signature: _____ **Date:** _____

By signing I acknowledge all information is true and accurate, and I authorize Santa Fe County staff to conduct necessary inspections on my property as related to this permit application. I agree and I understand that the issuance of any subsequent permits does not prevent the Santa Fe County Fire Prevention Division from requiring additional compliance with the provisions of the Santa Fe County Fire Code as adopted by the Board of County Commissioners.

Type of Permit Issued: _____ Date: _____

Approved By: _____ Date: _____

Redlines Yes No Inspections Conducted: Initial Pre-Final Final Certificate of Completion Yes No



Multi-Purpose State Building Application

State of New Mexico Regulation and Licensing Department Construction Industries Division
Santa Fe 2550 Cerrillos Rd Santa Fe, NM 87505 Phone: (505) 476 - 4700 Fax: (505) 476 - 4685
Albuquerque 5500 San Antonio NE Albuquerque, NM 87109 (505) 222 - 9800 (505) 765 - 5670
Las Cruces 505 S. Main St. Ste. 118 Las Cruces, NM 88004 (575) 524 - 6320 (575) 524 - 6319

Please check the appropriate type for which you are applying for:

- Building Review/Permit (includes electrical / mechanical / plumbing)
Residential Commercial Pre-Bid Reroof
Trade Review Only
Electrical Review Mechanical/Plumbing Review

THE FOLLOWING INFORMATION MUST BE PROVIDED

Parcel No. and/or Project Address (must provide a physical address) Nearest City/Town/Village Zip Code County
GPS Coordinates optional X Coordinate Y Coordinate
MUST provide written Directions

Property Owner or Homeowner Information:

First Name Last Name E-mail address:
Address No. & Street / PO Box / Rural Route City State Zip Code Phone

Contractor Information (must provide proof of contract):

Company Name NM State License # and classification
Address No. & Street / PO Box / Rural Route City State
Contact Information (Name) Phone E-mail address:

Design Professional Information:

Company Name NM State License #
Address No. & Street / PO Box / Rural Route City State
Contact Information (Name) Phone E-mail address:

Type of Construction I II III IV V A B Energy Compliance Climate Zone:
Occupancy Group A B E F H I M R S U Prescriptive Trade-off Performance Energy Code Not Applicable
Division 1 2 3 4 5
Square Footage: Valuation / Sign Contract: Fire Sprinklers Apply Y / N LP gas Appliance Apply Y / N

APPLICANT MUST READ AND SIGN THE FOLLOWING: I hereby acknowledge by my signature below that I have read this application and state that the above is correct. I agree to comply with the requirements for the New Mexico Building Code. I waive my right to require any inspector to possess a search warrant before they enter the premises to inspect the building covered by this permit. However, I waive this right only on the following conditions: The inspector must be approved by the Construction Industries Division and this inspection must be made at reasonable times for purpose of determining whether the work of building or structure on the premises complies with the New Mexico Building Code. I understand that the issuance of this permit shall not prevent the Construction Industries Division from requiring compliance with the provisions of the New Mexico Building Code.

X Signature Date

Officeical Use Only

Date Issued: Processed By: Tracking Number:
Received By: Total Fees Due:
Walk In Mail E-Mail: Partial Payment:
Paid By: Balance Due:
Check Money Order Credit Card Purchase Order

PLANNING/ZONING APPROVED BY: Signature Date:
FLOOD PLAIN APPROVED BY: Signature Date:
GENERAL BUILDING APPROVED BY: Signature Date:
UPG/UMC APPROVED BY: Signature Date:
NEC APPROVED BY: Signature Date: