

# **General Guidelines For Newly Proposed Businesses in the City of Sierra Vista**

Below are some basic guidelines that may be applicable to any prospective business planning to start up and move into an existing space or building. In order to obtain a **Business License** and **Certificate of Occupancy**, each occupancy space and tenant improvement must be evaluated independently based on the type of use, proposed improvements and building construction.

1. Prior to moving into a tenant space, a zoning compliance application is required to be completed and submitted to the office of Community Development and be signed by a representative of the Zoning, Fire, Building and Public Works Divisions. This typically requires an inspection of the property with the owner or owner's representative and the prospective user to determine the proposed use and potential renovations, if applicable.
2. If the prospective tenant is not proposing any renovations to the existing space and there is no change of use, division, or classification of occupancy, the inspections are still necessary to determine if the existing structure is safe and meets the code requirements under which it was originally designed. Any unsafe or obvious code violations would still have to be addressed prior to obtaining a Certificate of Occupancy.
3. The Building Administrator may require that a dimensioned floor plan and a basic code analysis be submitted for evaluation of such building or space has no recorded history of:
  - a. Past modifications
  - b. Has been modified from its original layout
  - c. Changed from its intended use
  - d. Has been vacant for an extended period of time
4. Prior to any renovations to the proposed tenant space, detailed construction plans and a building permit application shall be submitted for review and approval with the Building Department. Once the building documents are approved, a building permit can be issued and renovations can begin.
5. Depending on the extent of the renovation work, construction documents may be required to be prepared by a design professional registered in the State of Arizona.
6. A local amendment requires that all tenant space shall be separated by a minimum of a 1-hour fire partition at tenant separation walls extending to the roof sheathing/roof decking. All tenant separation walls must be clearly identified on the floor plan.

7. Another local code amendment to the IBC allows for one public/employee restroom to be permitted where the occupant load does not exceed 50. Occupant loads are determined by Table 1004.1.1 of the IBC. The table specifies the floor area required per occupant and is based on use and classification.
8. Chapter 34 of the 2006 International Building Code requires that at least 20% of the total cost of improvements be put toward ADA improvements. This may include: upgrading a handicap ramp at the entry door, interior accessible route to any primary functions, ADA compliant toilet room(s), etc. and is dependent on the overall scope of the project.
9. Section 3406 specifies that “No change shall be made in the use or occupancy of any building that would place the building in a different division of the same group of occupancy or in a different group of occupancies, unless such a building is made to comply with the requirements of the code of such division or group of occupancy.”

Example: if a previous retail space is now going to be converted to a restaurant, this would be considered a complete change of use and would require all aspects of the space to meet the code requirements for a restaurant or A-2 occupancy classification.

It is our hope that this information will be of assistance to you, to help guide you through the process of obtaining a Business License and Certificate of Occupancy. This is not an all inclusive list of requirements, but is provided to help you further understand what may or may not be required before signing a lease agreement and opening your business. If you have further questions, please contact us at the Department of Community Development at (520) 458-3315.

Thank you,

Bruce Alarie  
Acting Building Administrator  
City of Sierra Vista  
[Bruce.Alarie@SierraVistaAZ.gov](mailto:Bruce.Alarie@SierraVistaAZ.gov)

**City of Sierra Vista**  
**BUSINESS LICENSE APPLICATION**



**NAME OF BUSINESS:** \_\_\_\_\_

Business Phone: \_\_\_\_\_ AZ Sales Tax #: \_\_\_\_\_

Physical Location: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP

E-Mail Address: \_\_\_\_\_

Please check here if you wish to receive your renewals by email: \_\_\_\_\_

**OWNER:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

Driver's License #/State: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP

---OR---

**MANAGER:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

Driver's License #/State: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP

Emergency Contact / Phone: \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

**OWNERSHIP:** Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation or LLC \_\_\_\_\_

\_\_\_\_ Contractor, Contractor # \_\_\_\_\_ Expiration \_\_\_\_\_

Contractor type: \_\_\_\_\_

**NO. OF EMPLOYEES:** \_\_\_\_\_ **DATE BUSINESS BEGAN IN SIERRA VISTA:** \_\_\_\_\_

<b>OFFICIAL USE ONLY</b>			
<b>DATE RECEIVED:</b> _____	<b>AMOUNT PAID:</b> _____	<b>CK</b> _____	<b>CA</b> _____
<b>NAICS or SIC Code</b> _____	<b>LOCATION ID</b> _____	<b>OP</b> _____	

I have read and acknowledge the following rules:

1. This application must be approved before I can lawfully engage in any business activities in the City of Sierra Vista
2. A separate license is required for each business location.
3. Written notification of any changes or cancellation of this application must be made immediately to the License Clerk. Without written notification of cancellation, billing will continue.
4. This license is **NON-TRANSFERABLE** and shall be valid until revoked by the City Clerk.
5. The application fee is \$100 which includes the first year license fee. Subsequent renewals will be \$50.00 per year.
6. I certify that if applicable, I will submit the application for an Arizona State Sales Tax Number for the location described with five (5) working days of the approval of this application.
7. A separate permit is required for any business sign.
8. When operating from a commercial location, I will be required to submit a zoning compliance certificate. If operating from my home within City Limits, I will be required to complete a Home Occupation Application.
9. I hereby certify that the statements made herein, to the best of my belief and knowledge, are true and correct.

**I UNDERSTAND THAT THIS LICENSE IS CONTINGENT UPON APPROVAL FROM COMMUNITY DEVELOPMENT, THE FIRE DEPARTMENT, AND ENVIRONMENTAL SERVICES:**

SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_

I request to not be contacted by outside businesses or solicitors:

SIGNATURE: \_\_\_\_\_



# ZONING COMPLIANCE CERTIFICATE

1. **Previous Use/Occupancy Classification** \_\_\_\_\_
2. **Type of Construction of the overall Building** \_\_\_\_\_
3. **Proposed Use/Occupancy Classification (2015 IBC Chapter 3)** \_\_\_\_\_  
B – Office, doctor, real estate    M – Retail sales  
F – Metal fabrication                S – Combustible storage
4. **Occupancy Classification of Adjacent Tenant Spaces**  
Left side \_\_\_\_\_ Right side \_\_\_\_\_ Rear \_\_\_\_\_
5. **Approximate Square Footage of Tenant Space** \_\_\_\_\_  
Overall building square footage \_\_\_\_\_
6. **Occupancy Separation (2015 IBC Section 508) (One-hour per amendment)**  
Rating provided (0hr, 1hr, 2hr,3hr)  
Non-separated uses – yes or no  
Separated uses required – yes or no  
no Rating required (1hr, 2hr, 3hr)
7. **Automatic Sprinkler**  
**System** Provided – yes or no  
Required – yes or no
8. **Occupant Load (2015 IBC Chapter 10)**  
Mixed uses – yes or no  
Occupancy Group \_\_\_\_\_ - \_\_\_\_\_  
Occupancy Group \_\_\_\_\_ - \_\_\_\_\_
9. **Means of Egress (2015 IBC Chapter 10)**  
Number of exits required \_\_\_\_\_  
Number of exits provided \_\_\_\_\_
10. **Bathroom Requirements**
11. **Action required – yes or no**

Additional Comments:

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## ZONING COMPLIANCE CERTIFICATE

	DFU	# of Fixtures	Total DFU
Commercial clothes washer	3		
Exam lavatory	1		
Dental lavatory	1		
Dental unit or cuspidor	1		
Drinking fountain	0.5		
Floor drain (non-emerg)	2		
Bathtub	2		
Shower	2		
Lavatory	1		
Urinal	4		
Urinal - waterless	2		
Water closet - public 1.6 gpf	4		
Water closet - private 1.6 gpf	3		
Water closet - flushometer tank	4		
Salon shampoo sink	2		
Pet bathing sink	2		
Kitchen sink - each faucet	2		
Service sink - mop	2		
Sink-hand	2		
Sink-floor (see Table 709.2)	<u>2</u>		
Bar sink	<u>1</u>		
Trench Drain	6		=
		<b>Total DFU</b>	<b>TOTAL</b>