



City of St. Johns Demolition Plan review Application

Project Name (if Applicable) _____

Applicant Information:

Name of Applicant: Capengo Holdings
Mailing Address: 1202 E. White Mt. Blvd
City/State/Zip Code: Pine Top AZ 85935
Telephone Number: 602 492 1495
Email Address: stj@dweb.us

Property Information

APN/Parcel Number: 203-26-210A
Total Acreage: 0.45
Zoning Classification: Commercial + Industrial
Property Information: Real Property
(complete checklist on back)

Contractor/Engineer/Architect

Name: None - Self Demo
Mailing Address: _____
City/State/Zip Code: _____
Telephone Number: _____
Email Address: _____
License Number: _____

Submittal of this application constitutes consent of the applicant in granting City of St. Johns staff access to the subject property during the course of the project review. No further consent or notice shall be required

Property Owner (if different)

Name: Same info as
Mailing Address: _____
City/State/Zip Code: _____
Telephone Number: _____
Email Address: _____

I hereby certify that the information in this Application is correct and agree to abide by regulations on the City of St. Johns and the State of Arizona

[Signature]
Signature of Applicant
Date: 01/22/2026

Received By: _____ Date: _____

Signature of Owner (if Different)
Date: _____

Bldg. Insp. Approval: Y__ N__
Date: _____ Notes Y__ N__ (See Attached)
Zoning Adm. Approval: Y__ N__
Date: _____ Notes Y__ N__ (See Attached)

City of St. Johns

DEMOLITION – STRUCTURE INFORMATION CHECKLIST

• Prior to commencement of demolition, the applicant shall provide sufficient information for verification of compliance with all City requirements and public safety standards. The following information shall be provided:

- **A.** Type of structure to be demolished (residential, commercial, manufactured, accessory, other). *Commercial*
- **B.** Approximate square footage of the structure. *35,000 SF*
- **C.** Number of stories. *2*
- **D.** Construction type (wood frame, masonry, steel, manufactured, mixed).
Building is wood, Demo is stone
- **E.** Year built, if known, or indicate unknown.
- **F.** Current occupancy status (vacant or occupied).
All structures shall be vacant prior to demolition. Used by staff (storage, repairs)
- **G.** Entire structure or partial demolition. If partial, describe portion to remain.
partial - wall facing ditto's Pizza
- **H.** Foundation type (slab, crawl space, basement, piers, unknown).
slab
- **I.** Distance to adjacent structures and whether attached or freestanding.
free standing
- **J.** Primary debris type(s) anticipated (wood, concrete, metal, roofing, glass, mixed).
block / concrete
- **K.** Hazard acknowledgment: Applicant affirms no known hazardous materials and accepts responsibility if discovered.
No haz materials
- **L.** Two (2) current photographs of the structure (recommended).
- **M.** Simple site sketch showing structure location, property lines, and nearby improvements (recommended).

• **NOTE**

• All utilities serving the structure, including electric, gas, water, and sewer, shall be disconnected and verified by inspection prior to demolition. Septic tanks, where applicable, shall be properly abandoned in accordance with applicable regulations. A final clearance inspection is required prior to permit closeout.

• **Applicant Signature:**  **Date:** 01/22/2022

Staff Initials: _____ **Date:** _____