



**APPLICATION FOR RESIDENTIAL BUILDING & ZONING PERMIT
APPLICATION**

Planning & Zoning, P.O. Box 1845, Jonesboro, AR 72403 – (870) 932-0406, fax (870) 336-3036
www.jonesboro.org

(OFFICE USE ONLY) PERMIT NO. ISSUED:		DATE: 10.11.17	
Property Information		Parcel No. (if known)	
Address: 4018 Mt Carmel Rd		City: Jonesboro	
Zoning Classification: R-1			
Please describe proposed use: Shop			
Applicant's Name: James Cook			
Address: 4018 Mt Carmel Rd			
City: Jonesboro	State: Ar.	ZIP Code: 72404	
Phone: 870-219-4502	Email Address: j4m5c@sbcglobal.net		
Arkansas Contractor License #:		Privilege #:	
Owner's Name: (If Same, Input Same) James Cook			
Address: 4018 Mt Carmel Rd			
City: Jonesboro	State: Ar.	ZIP Code: 72404	
Phone: 870-219-4502	Email Address: j4m5c@sbcglobal.net		
One (1) Copy of Site Plan: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)		One (1) Set of Construction Documents: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)	
Type of Construction: Pole Barn		Code Review Included: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)	
Seismic Zone #3 Signed Certification: Yes / No (Please circle)			
Engineering Firm:			
Engineer's Certification and Signature: Yes / No (Please circle)		Phone:	
Address:	City:	State:	
Architectural Firm/Plans Drawn By:			
Architect's Certification and Signature: Yes / No (Please circle)		Phone:	
Address:	City:	State:	
CONTRACTED PRICE OF PROJECT: \$ 181,000			
Flood Plain: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)		Flood Zone District:	
Elevation Certificate Required: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)			
FEMA CLOMA/LOMA Required: Yes <input checked="" type="radio"/> No <input type="radio"/> (Please circle)	GF Issuance:	Certificate #:	

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TYPE OF IMPROVEMENT:		PROPOSED USE:	
New Building:	Yes	Multi-Family:	No No of Units: 1
Addition:	No	Institution:	
Alteration:			
Demolition:	No	Temporary Structure:	No
Moving:	No	Home Occupation:	No
Foundation Only:	No	Storage Shed:	Yes 40X60
Pool:	No	Fence:	No
Accessory Apartment:	No	Pool House:	No
Other:			
COMMENTS (OFFICE USE ONLY)			
Planners Remarks:			
Engineering Remarks:			
Building Department Remarks:			
Review Status:			
Zoning:	Engineering:	Building:	C.O. Issuance Date:
APPLICANT'S CERTIFICATION			
I certify that the answers to the above questions and any statements made on same are true and complete to the best of my knowledge.			
Print Name :	James Cook	Designation:	Phone/Fax: 870-219-4502
Email:	j4m5c@sbcglobal.net		
Signature:	James Cook		Date: 9-12-17

**OWNER/BUILDER AFFIDAVIT
CITY OF JONESBORO, ARKANSAS**

Ark. Code Ann. §17-25-501 et seq. requires a residential license for certain residential buildings.

A property owner who acts as a residential building contractor for the purpose of constructing his own residence is not required to have a residential building license to make application for a building permit of a single family residence that is intended to be the property owners residence, unless the property owner constructs more than one residence per calendar year.

PROPERTY ADDRESS 4018 MT Carmel Road
Jonesboro Ar. 72404

Now, on this 12 day of Sep., 2017, I, JAMES COOL
(Please print your name)

declare that I am applying for a building permit for the above described property; that I will be responsible for performing the work and meeting the requirements of all codes, ordinances, and laws; that I am the owner of the above described property; that I am an occupant of the property; and that the intent of the use of the property is by the owner as a single family residence. Therefore, I am not required to have a residential building license.

Owner's Signature James Cool Date 9-12-17