



**APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT
- INCLUDES MULTI-FAMILY 3+ UNITS**

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:	
Property Information		Parcel No. (if known)	
Address: <u>1007 Commerce</u>		City: <u>Jonesboro</u>	
Zoning Classification:			
Please describe proposed use: <u>Fence</u>			
Applicant's Name: <u>Barry Miller - Miller Construction</u>			
Address: <u>2513 Abby Rd</u>			
City: <u>Jonesboro</u>	State: <u>AR</u>	ZIP Code: <u>72401</u>	
Phone: <u>870-932-1121</u>	Email Address: <u>millerfence@yahoo.com</u>		
Arkansas Contractor License #: <u>21731</u>	Privilege #:		
Owner's Name: (If Same, Input Same) <u>Hidden Point</u>			
Address: <u>1007 Commerce</u>			
City: <u>Jonesboro</u>	State: <u>AR</u>	ZIP Code: <u>72401</u>	
Phone:	Email Address:		
Asbestos Requirement (State of Arkansas): State regulations require contractors to have lead and asbestos inspections prior to renovation or alterations of commercial structures. You are required to contact: Arkansas Department of Environmental Quality (ADEQ) at: 501-682-0718.			
Three (3) Copies of Site Plan: Yes / <input checked="" type="radio"/> No (Please circle)		Three (3) Complete Set of Construction Documents: Yes / <input checked="" type="radio"/> No (Please circle)	
Type of Construction: <u>Fence</u>		Code Review Included: Yes / <input checked="" type="radio"/> No (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:			
Architect's Certification and Signature: Yes / No (Please circle)		Phone:	
Address:	City:	State:	
<input checked="" type="checkbox"/> CONTRACTED PRICE OF PROJECT: \$ <u>48000.00</u>			
Flood Plain: Yes / No (Please circle)		Flood Zone District:	
Elevation Certificate Required: Yes / <input checked="" type="radio"/> No (Please circle)			
FEMA CLOMA/LOMA Required: Yes / No (Please circle)		GF Issuance:	Certificate #:

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TYPE OF IMPROVEMENT:	PROPOSED USE:
New Building:	Multi-Family:
Addition:	Institution:
Interior Alteration:	Assembly:
Demolition:	Industrial:
Moving:	Business:
Foundation Only:	Storage:
Change of Use:	Mercantile:
Sign:	Hazardous:
Site & Drainage/Grading Permit:	

Other:

COMMENTS (OFFICE USE ONLY)

Planners Remarks:

Fire Inspections Remarks:

Sanitation Department Remarks:

Engineering Remarks:

Building Department Remarks:

Review Status:

Zoning Dept.:

Engineering Dept.:

Fire Marshall:

Building Dept.:

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 :

Barry M'Gee

Designation:

Phone/Fax:

870-932-1121

Email:

mgeefence@yahoo.com

Signature:

[Handwritten Signature]

Date:

7-17-18