



## APPLICATION FOR RESIDENTIAL BUILDING & ZONING PERMIT APPLICATION

www	v.jonesboro.org		32 0100, Ima (0,0) 330 3030	
(OFFICE USE ONLY) PERMIT NO. ISSUED:			DATE: 3.21.18	
Property Information			Parcel No. (if known)	
Address: 400 ( Evandale	City Jon	esporc		
Zoning Classification: R-1				
Please describe proposed use:	n Ho	was		
Applicant's Name:	0 1	1.4 %		
Address: 4001 Evandale				
city: Jones boro	State: AR)	2	ZIP Code: 72401	
Phone: 97.20324	Email Address:			
Arkansas Contractor License #:	Privilege #:			
Owner's Name: (If Same, Input Same)				
Address: 5 AME				
city: Joneshoro	State: AR	K	ZIP Code: 7240/	
Phone: 9720324	Email Address:			
		10		
One (1) Copy of Site Plan: Yes No (Please circle)	One (1) Set of Construction Documents: Yes / No (Please circle)			
Type of Construction: add on alaga	Gode Review Included: Yes / 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:	S	tate:	
Architectural Firm/Plans Drawn By:				
Architect's Certification and Signature: Yes / No (Please circle)		Phone:		
Address:	City:	State:		
CONTRACTED PRICE OF PROJECT: \$ 8000,00				
Flood Plain: Yes / No (Please circle)			Flood Zone District:	
Elevation Certificate Required: Yes / No (Please circle)			2.	
FEMA CLOMA/LOMA Required: Yes / No (Please circle)	GF Issuance:		Certificate #:	

APPLICATION FOR RESIDENTIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2				
TYPE OF IMPROVEMENT:	PROPOSED USE	PROPOSED USE:		
New Building: (A)	Multi-Family:	No of Units:		
Addition: UE)	Institution:	Institution:		
Alteration:				
Demolition:	Temporary Struct	Temporary Structure:		
Moving:	Home Occupation	Home Occupation:		
Foundation Only:	Storage Shed:	Storage Shed:		
Pool:	Fence:	Fence:		
Accessory Apartment:	Pool House:	Pool House:		
Other:				
СОММЕ	NTS (OFFICE USE ONLY	)		
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 a knowledge.  Jun Dautman	ny statements made on sar	ne are true and complete to the best of my		
Print Name :	Designation:	Phone/Fax:		
Email:		B <sup>2</sup>		
Signature: Jun Martin	an	Date:		

## 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 4001 Evandale Jonestoro

Now, on this 10 day of 8 ,2 18.1, Tem Cartman

(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 Im Dartman Date 8-10-18

Jerry Todd 15 To do foundation