

## APPLICATION FOR COMMERCIAL OFF-PREMISE SIGN APPLICATION

Planning & Zoning Dept., 300 S. Church Street, Jonesboro, AR 72403 – (870) 932-0406, fax (870) 336-3036

<b>(OFFICE USE ONLY) PERMIT NO. ISSUED:</b>		<b>DATE:</b> 01/04/19	
<b>Property Information</b>		Parcel No. (if known)	
		01-144282-03300	
Address: 2511 E. HIGHLAND DR.	City: JONESBORO	State: AR	Zip Code: 72401
<b>Zoning Classification:</b> C-3		<b>** Does this property abut residential property? Yes / No (Please circle)</b>	
Please describe signage scope of work: 3 Faced sign to be erected near N.E. cor of property as replacement.			
<b>Applicant's Name:</b> CAVENAGH TRUST PROPERTIES			
Address: P.O. Box 429			
City: DALNOT RIDGE	State: AR	ZIP Code: 72476	
Phone: (870) 886-4000	Email Address: mattcav@cavautogroup.com		
Arkansas Contractor License #:	Privilege #:		
<b>Owner's Name:</b> (If Same, Input Same) SAME			
Address:			
City:	State:	ZIP Code:	
Phone:	Email Address:		
<b>** Off-Premise Signs are permitted in C-3, I-1, &amp; I-2 Zoning Districts except where the property on which the sign is to be located adjoins a residentially-zoned property; then it shall require a Conditional Use application before the Metropolitan Area Planning Commission.</b>			
Three (3) Copies of Site Plan: <input checked="" type="radio"/> Yes / No (Please circle)		Three (3) Complete Set of Construction Details/Documents: Yes / No (Please circle)	
Existing adjacent Signs shown on plans: <input checked="" type="radio"/> Yes / No (Please circle)		Code Review Included: Yes / No (Please circle)	
Are existing street right of ways denoted on plans: <input checked="" type="radio"/> Yes / No (Please circle)			
Engineering Firm: CIVILOGIC			
Engineer's Certification Statement and Signature: <input checked="" type="radio"/> Yes / No (Please circle)		Phone: (870) 932-7880	
Address: 203 SOUTHWEST DRIVE	City: JONESBORO	State: AR	Zip Code: 72401
CONTRACTED SIGN PRICE OF PROJECT: \$			
<b>FOR OFFICE USE ONLY</b>			
Flood Plain: Yes / No (Please circle)		Flood Zone District:	
Elevation Certificate Required: Yes / No (Please circle)			
FEMA CLOMA/LOMA Required: Yes / No (Please circle)	GF Issuance:	Certificate #:	

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<b>TYPE OF IMPROVEMENT:</b>		<b>TYPE OF FACE MOVEMENT/VIDEO CAPABILITY:</b>	
New Off Premise Sign:		Type:	
Replacement: *		Transition Speed:	
Alteration:		Illumination:	
Re-facing Only:			
Demolition:			

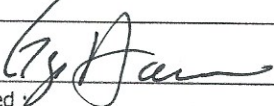
**ARTICLE SECTION: 14.32.11: NO OFF-PREMISE OUTDOOR ADVERTISING SIGN SHALL BE ERECTED WITHOUT SECURING A PERMIT FROM THE CITY OF JONESBORO AND PAYMENT OF A ONE-TIME PERMIT FEE ESTABLISHED BY CITY COUNCIL. AN APPLICATION FOR AN OFF-PREMISE SIGN SHALL BE ACCOMPANIED BY A SITE SURVEY AND PLAN AT A MINIMUM SCALE OF 1 INCH = 50 FEET, PREPARED BY A REGISTERED SURVEYOR OR ENGINEER LICENSED IN ARKANSAS, SHOWING THE FOLLOWING INFORMATION:**

1. Completed information on this form; 2. Existing property boundaries and any structures and other physical features of the site; 3. Setback lines; 4. Elevation views of the proposed sign showing all faces, height and width dimensions, and dimension from ground level to the bottom of the sign faces; 5. Construction details of the proposed sign showing all structural components, electrical facilities, and lighting; and, 6. Certified statement from a professional structural engineer licensed in Arkansas that the sign meets all requirements of the International Building Code including wind load provisions. 7. Following issuance of a sign permit and completion of installation, the structural engineer shall verify, in writing, to the City Planner that the sign has been installed in accordance with the approved plan and permit.

<b>COMMENTS (OFFICE USE ONLY)</b>			
City Planner's Remarks:			
Fire Inspections Remarks:			
City Engineer's Remarks:			
Building Department Remarks:			
Review Status:			
Zoning Dept.:	Engineering Dept.:	Fire Marshall:	Building Dept.:

**APPLICANT'S & OWNER'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.

Applicant's Signature: 			
Applicant's Name Printed: <b>GEORGE HAMMAN</b>	Designation: <b>CIVIL CONSULTANT</b>	Date: <b>01/04/19</b>	
Owner's Signature:			
Owner's Name Printed: <b>CAVENAUGH TRUST PROPERTIES</b>		Date: <b>01/04/19</b>	