City of Jonesboro ARKANISAS

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APPLICATION FOR RESIDE	ENTIAL BU		& ZONING PERMIT	
Planning & Zoning, P.O. Box 1845, Jon	nesboro, AR 7 ww.jonesboro		932-0406, fax (870) 336-3036	
(OFFICE USE ONLY) PERMIT NO. ISSUED:			DATE: 7/1/2020	
roperty Information		•	Parcel No. (if known)	
Address: MONTOE B GLLOT) Zoning Classification:	city Jan	slooru	Arkansas	
Please describe proposed use:	de la come			
Applicant's Name: Alberto Ma	vales			
Address:	MARCO			
221 Hollis St			-	
city: BOND	State: ARKANSAS ZIP Code: 72416		SZIP Code: 72416	
Phone: 870-273-3818	Email Addre	UNSTRU	ction officia lagma	
Arkansas Contractor License #: 1000C	Privilege #:		e ju	
Owner's Name: (If Same, Input Same)	5. 7			
Address:				
Same				
city: Same	State:	State: ZIP Code:		
Phone: Samae	Email Address:			
JUIL				
One (1) Copy of Site Plan: Yes / No (Please circle)	One (1) Set of Construction Documents: Yes / No (Please circle)			
Type of Construction:	Code Review Included: Yes / No (Please circle)			
Seismic Zone #3 Signed Certification: Yes / No (Please of	ircle)			
Engineering Firm:				
Engineer's Certification and Signature: Yes / No (Please of	circle)	Phone:		
Address:	City:		State:	
Architectural Firm/Plans Drawn By:				
Architect's Certification and Signature: Yes / No (Please	Please circle) Pt		hone:	
Address:	City:		State:	
CONTRACTED PRICE OF PROJECT: \$ 49 ()	(), ())			
,00	0.00			
Flood Plain: Yes / No (Please circle)			Flood Zone District:	
Elevation Certificate Required: Yes / No (Please circle)	1			
	GF Issuance:		Certificate #:	
EMA CLOMA/LOMA Required: Yes / No (Please circle)	GF Issuance	e:	Certificate #:	

(Please sign Page 2)

APPLICAT	ION FOR RESIDENT	TIAL BUILDING & ZONING	PERMIT APPLICATION PAGE 2		
TYPE OF IMPROVEMENT:		PROPOSED U	JSE:		
New Building: New	house	Multi-Family:	No of Units	5:	
Addition:		Institution:			
Alteration:			u		
Demolition:		Temporary Str	ucture:		
Moving:		Home Occupat	ion:		
Foundation Only:		Storage Shed:			
Pool:		Fence:			
Accessory Apartment:		Pool House:			
Other:				100	
	CO	MMENTS (OFFICE USE ON	195		
Building Department Remark	s:				
Review Status:				-	
Zoning:	Engineering:	Building:	C.O. Issuance Date:		
·	AP	PLICANT'S CERTIFICATIO	and the second se	1000	
Certify that the answers to t chowledge. Print Name : ALSCONSTRUCTION	ales	Designation:	Phone/Fax:	est of my	
imail:	gmat	t.com			
Signature:	let -	C	Date: 7-1-202	0	

## **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 1330 W MONYOE AVE

Now, on this day of JULY ,2020 I, Alberto Morales

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.

Date 7/2 2020 **Owner's Signature**