



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:	
Property Information		Parcel No. (if known)	
Address: 3701 Casey Springs RD		City: Jonesboro	
Zoning Classification: R-1			
Please describe proposed use: Storage Building			
Applicant's Name: Michael Craig			
Address: 3701 Casey Springs RD			
City: Jonesboro		State: AR	ZIP Code: 72404
Phone: 870 974 2398		Email Address: michaelcraig@cphee.com	
Arkansas Contractor License #:		Privilege #:	
Owner's Name: (If Same, Input Same) SAME			
Address: SAME			
City: SAME		State:	ZIP Code:
Phone: SAME		Email Address:	
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 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: \$ 99,800			
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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TYPE OF IMPROVEMENT:	PROPOSED USE:
New Building:	Multi-Family: No of Units:
Addition:	Institution:
Alteration:	
Demolition:	Temporary Structure:
Moving:	Home Occupation:
Foundation Only:	Storage Shed: 24x30
Pool:	Fence:
Accessory Apartment:	Pool House:
Other:	

COMMENTS (OFFICE USE ONLY)

Planners Remarks:

Engineering Remarks:

Building Department Remarks:

Review Status:

Zoning:	Engineering:	Building:	C.O. Issuance Date:
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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: Michael Craig	Designation:	Phone/Fax: 870-974-2398
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Email:

Signature: Michael Craig	Date: 2/22/17
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**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 3701 Casey Springs RD
Jonesboro AR, 72404

Now, on this 27 day of Feb, 2017, I, Michael Craig
(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 Michael Craig Date 2/27/17



Planning Charge Sheet

Residential Approvals – Planning Review (select all that apply) 01-0731:

- | | | |
|---|--|---|
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Multiple Family Dwelling | <input checked="" type="checkbox"/> Detached/Accessory Bldg |
| <input type="checkbox"/> Single Family Additions | <input type="checkbox"/> Single Family Alterations | <input type="checkbox"/> Swimming Pools |
| <input type="checkbox"/> Walls, Fences, Decks Etc | <input type="checkbox"/> Multi Family Additions | <input type="checkbox"/> Multi Family Accessory Bldg |

Commercial Approvals – Planning Review (select all that apply) 01-0732:

- | | | |
|--|---|--|
| <input type="checkbox"/> Building _____ Sqft. | <input type="checkbox"/> Interior Alterations/Repairs | <input type="checkbox"/> Awnings/Canopies |
| <input type="checkbox"/> Accessory Bldgs, etc. | <input type="checkbox"/> Parking Lots | <input type="checkbox"/> Landfill and Extraction |
| <input type="checkbox"/> Gravel Mining | <input type="checkbox"/> Change of Use | <input type="checkbox"/> Storage Tanks |
| <input type="checkbox"/> Temp Tents, Trailers & Structures | | |

Residential Zoning Districts : (Zoning Map Amendments) 01-0516:

- | |
|--|
| <input type="checkbox"/> Single Family Districts _____ Acres |
| <input type="checkbox"/> Multi Family Districts _____ Acres |

Non-Residential Zoning Districts : (Zoning Map Amendments) 01-0516:

- Zoning Map Amendments _____ Acres

Special District Applications 01-0516:

- | | |
|--|--|
| <input type="checkbox"/> Village Residential Overlay | <input type="checkbox"/> JMA-O, Jonesboro Municipal Overlay District |
| <input type="checkbox"/> Planned Development District _____ phase (preliminary, final, modification) | |

Board of Zoning Appeals Fee 01-0516:

- | | | | |
|--------------------------------------|-------------------------------------|--|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Commercial | <input type="checkbox"/> Conditional Use | <input type="checkbox"/> Compatible Non-Conforming Use |
|--------------------------------------|-------------------------------------|--|--|

Subdivision Planning Fees 01-0733:

- Minor Plats & Replats Reviews MAPC Approval: _____ Lots _____ Acres

On/Off-Premise Signage Permits – Planning Review 01-0734:

- | | | |
|--|---|--|
| <input type="checkbox"/> Billboards | <input type="checkbox"/> High Rise Interstate _____ faces | <input type="checkbox"/> Bulletin Board _____ Sqft |
| <input type="checkbox"/> Construction Sign | <input type="checkbox"/> Ground Sign _____ Sqft | <input type="checkbox"/> Wall & Awning _____ Sqft |
| <input type="checkbox"/> Directional Sign _____ Sqft | <input type="checkbox"/> Pole Sign _____ Sqft | <input type="checkbox"/> Marquee Sign _____ Sqft |
| <input type="checkbox"/> Promo Event | <input type="checkbox"/> Special Event Sign | <input type="checkbox"/> Grand Opening Sign |
| <input type="checkbox"/> Corner or Interior Parcel Sign _____ Sqft | <input type="checkbox"/> Faces _____ | |

Zoning Sign Deposit 01-0155: _____ Number of Signs

Mapping and Duplicating Services Per Page 01-0735:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 8 ½" x 11" BW Copies | <input type="checkbox"/> 8 ½" x 11" Color Map | <input type="checkbox"/> Over Size Page | <input type="checkbox"/> Zoning Resolution |
| <input type="checkbox"/> Zoning Map 36"x50" | <input type="checkbox"/> Land Use (36"x44") | <input type="checkbox"/> 11"x17" Map | |
| <input type="checkbox"/> Property Owner Search/Plat Map | | <input type="checkbox"/> Zoning Certification Letter | |

Total Pages 1

Description: Storage Total Amount Due: \$ 0 - word variance

Site: Address: 3701 Casey Springs Rd Tracking No.: _____

Michael Craig
Customer Customer #

2m
City Official

3.22.17
Date