## APPLICATION FOR HOUSE, BUILDING, OR STRUCTURE DEMOLITION PERMIT

Building Inspections Dept., P.O. Box 1845, Joneshoro, AR 72403 - (870) 933-4602, fax (870) 933-4618 www.joneshoro.org

| (OFFICE USE ONLY) PERMIT NO. ISSUED: |  | DATE: |
| :---: | :---: | :---: |
| Property Information |  | Parcel No. (if known) |
| Address: | City |  |
| Zoning Classification: |  |  |
| Building Description: |  |  |
| Demolition Method: |  |  |
| Demolition Dates: Start | End |  |
| Owner's Name: |  |  |
| Address: |  |  |
| City: | State: | ZIP Code: |
| Phone: | Email Address: |  |
| Contractor's Name: |  |  |
| Address: |  |  |
| City: | State: | ZIP Code: |
| Phone: | Email Address: |  |
| Arkansas Contractor License \#: | Privilege \#: |  |
| Waste Disposal Site: |  |  |

Address:

| City: | State: | ZIP Code: |
| :--- | :--- | :--- |
| Phone: | Email Address: |  |
|  |  |  |

- All site demolition shall be performed in accordance with all local, state, and federal regulations.
- Please make checks payable to the City of Jonesboro in the amount of $\$ 50.00$.

