



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: 7/6/11 |
| Property Information 6701 | | Parcel No. (if known) |
| Address: 6701 Yanwinble | City: Bay | |
| Zoning Classification: R-1 | | |
| Please describe proposed use: our son's future home | | |
| Applicant's Name: Darrell + Sharon Spencer | | |
| Address: 118 mallard core | | |
| City: Bay | State: AR | ZIP Code: 72411 |
| Phone: 870-819-7575 761-3276 | Email Address: Sharonsj@suddenlink.net | |
| Arkansas Contractor License #: | Privilege #: | |
| Owner's Name: (If Same, Input Same) Same | | |
| Address: | | |
| City: | State: | ZIP Code: |
| Phone: | 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: \$ 10,000.00 to 15,000.00 New roof, doors, calport skirting, vinyl siding, window screens on all windows, deck on front, etc. | | |
| 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 #: |

there will be extensive interior work included.

(Please sign Page 2)

APPLICATION FOR RESIDENTIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2

| 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: | |
| Pool: | Fence: | |
| Accessory Apartment: | Pool House: | |

Other: *Stair on lot*

COMMENTS (OFFICE USE ONLY)

Planners Remarks:

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 any statements made on same are true and complete to the best of my knowledge.

| | | |
|---|--------------|---|
| Print Name : <i>Darrell & Sharon Spencer</i> | Designation: | Phone/Fax: <i>819-7575, 761-3276</i> |
|---|--------------|---|

Email: *Sharon.sj@suddenlink.net*

| | |
|---|-------------------------|
| Signature: <i>Darrell & Sharon Spencer</i> | Date: <i>6-28-16</i> |
|---|-------------------------|

**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 6701 Vanwinkle Bay, Ar
72411

Now, on this 28 day of June, 2016. I, Donnell + Sharon Spencer
(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 Donnell + Sharon Spencer Date 6-28-16



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 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:

- Single Family Districts _____ Acres
- Multi Family Districts _____ Acres

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

- Zoning Map Amendments _____ Acres

Special District Applications 01-0516:

- Village Residential Overlay JMA-O, Jonesboro Municipal Overlay District
- Planned Development District _____ phase (preliminary, final, modification)

Board of Zoning Appeals Fee 01-0516:

- Residential Commercial Conditional Use 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 | _____ Faces _____ | |

Zoning Sign Deposit 01-0155: _____ Number of Signs

Mapping and Duplicating Services Per Page 01-0735:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 8 1/2" x 11" BW Copies | <input type="checkbox"/> 8 1/2" 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 _____

Description: Mobile Home

Total Amount Due: \$ 0-2M

Site: Address: 6701 Vanwinkle

Tracking No.: SFR 16-377

DARRELL AND SHARON SPENCER

Customer

Customer #

2M
City Official

8/6/16
Date

Due to inspections giving perm. TS!