

SP 16-82



**APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT  
- INCLUDES MULTI-FAMILY 3+ UNITS**

Planning & Zoning, P.O. Box 1845, Jonesboro, AR 72403 – (870) 932-0406, fax (870) 336-3036  
www.jonesboro.org

|   |   |                       |
|---|---|-----------------------|
| <b>(OFFICE USE ONLY) PERMIT NO. ISSUED:</b> SP 16-82  |   | <b>DATE:</b> 3/16/16  |
| <b>Property Information</b>   |   | Parcel No. (if known) |
| Address: 3235 E Mathews   | City: Jonesboro   | AR                    |
| Zoning Classification: Business I-1   |   |                       |
| Please describe proposed use: Gym/Fitness Facility  |   |                       |
| <b>Applicant's Name:</b> Travis Knight / Arkansas Muscle LLC  |   |                       |
| Address: <sup>mailing</sup> 361 Southwest Dr Suite 236 / 1117 Falls Street (Physical)   |   |                       |
| City: Jonesboro   | State: AR   | ZIP Code: 72401       |
| Phone: 870 217 3745   | Email Address: ArkansasMuscle@live.com  |                       |
| Arkansas Contractor License #:  | Privilege #: 3372   |                       |
| <b>Owner's Name:</b> (If Same, Input Same)<br>Arkansas Muscle LLC will take ownership of the property from  |   |                       |
| Address:  |   |                       |
| City:   | State:  | ZIP Code:             |
| Phone:  | Email Address:  |                       |
| <p><b>Asbestos Requirement (State of Arkansas):</b> State regulations require contractors to have lead and asbestos inspections prior to renovation or alterations of commercial structures. You are required to contact: Arkansas Department of Environmental Quality (ADEQ) at: 501-682-0718.</p> |   |                       |
| Three (3) Copies of Site Plan: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)  | Three (3) Complete Set of Construction Documents: Yes / <input checked="" type="radio"/> No (Please circle) |                       |
| Type of Construction:   | Code Review Included: Yes / <input checked="" type="radio"/> No (Please circle)                             |                       |
| Seismic Zone #3 Signed Certification: Yes / <input checked="" type="radio"/> No (Please circle)   |   |                       |
| Engineering Firm:   |   |                       |
| Engineer's Certification and Signature: Yes / <input checked="" type="radio"/> No (Please circle)   | Phone:  |                       |
| Address:  | City:   | State:                |
| Architectural Firm: Stuck Associates  |   |                       |
| Architect's Certification and Signature: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)  | Phone: 870 932 4271   |                       |
| Address: 328 S Church St  | City: Jonesboro   | State: AR             |
| CONTRACTED PRICE OF PROJECT: \$ 18,500  |   |                       |
| Flood Plain: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)  | Flood Zone District:  |                       |
| Elevation Certificate Required: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)   |   |                       |
| FEMA CLOMA/LOMA Required: Yes / <input checked="" type="radio"/> No (Please circle)   | GF Issuance:  | Certificate #:        |

L+L Landco LLC  
Before Renewal

**APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2**

|  |                              |
|--|------------------------------|
| <b>TYPE OF IMPROVEMENT:</b>  | <b>PROPOSED USE:</b>         |
| New Building:  | Multi-Family:                |
| Addition:  | Institution:                 |
| Interior Alteration: Restroom Expansion/Wall for <sup>Office</sup> storage | Assembly:                    |
| Demolition:  | Industrial:                  |
| Moving:  | Business: Gym/Fitness Center |
| Foundation Only:   | Storage:                     |
| Change of Use:   | Mercantile:                  |
| Sign:  | Hazardous:                   |
| Site & Drainage/Grading Permit:  |                              |

Other:

**COMMENTS (OFFICE USE ONLY)**

Planners Remarks:

Fire Inspections Remarks:

Sanitation Department Remarks:

Engineering Remarks:

Building Department Remarks:

Review Status:

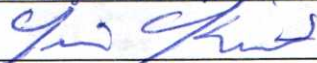
|               |                    |                |                 |
|---------------|--------------------|----------------|-----------------|
| Zoning Dept.: | Engineering Dept.: | Fire Marshall: | Building Dept.: |
|---------------|--------------------|----------------|-----------------|

**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: Travis Knight | Designation: | Phone/Fax: 870 217 3745 |
|---------------------------|--------------|-------------------------|

Email: Travis.knight00@luc.com

|  |               |
|--|---------------|
| Signature:  | Date: 3/16/16 |
|--|---------------|



Planning Charge Sheet

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

- Single Family Dwelling, Multiple Family Dwelling, Detached/Accessory Bldg, Single Family Additions, Single Family Alterations, Swimming Pools, Walls, Fences, Decks Etc, Multi Family Additions, Multi Family Accessory Bldg

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

- Building Sqft., Interior Alterations/Repairs, Awnings/Canopies, Accessory Bldgs, etc., Parking Lots, Landfill and Extraction, Gravel Mining, Change of Use, Storage Tanks, 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

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:

- Billboards, High Rise Interstate faces, Bulletin Board Sqft, Construction Sign, Ground Sign Sqft, Wall & Awning Sqft, Directional Sign Sqft, Pole Sign Sqft, Marquee Sign Sqft, Promo Event, Special Event Sign, Grand Opening Sign, Corner or Interior Parcel Sign Sqft Faces

Zoning Sign Deposit 01-0155: Number of Signs

Mapping and Duplicating Services Per Page 01-0735:

- 8 1/2" x 11" BW Copies, 8 1/2" x 11" Color Map, Over Size Page, Zoning Resolution, Zoning Map 36"x50", Land Use (36"x44"), 11"x17" Map, Property Owner Search/Plat Map, Zoning Certification Letter

Total Pages

Description: Restroom Expansion Total Amount Due: \$100.00

Site: Address: 3235 E. Matthews Tracking No.: SP 16-82

Travis Knight/AR Muscle LLC City Official 2M Date 3.16.16

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name **ARKANSAS MUSCLE LLC.**

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**3235 MATTHEWS**  
 City **JONESBORO** State **AR** ZIP Code **72401**

## FOR INSURANCE COMPANY USE

Policy Number:  
 Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**01-144211-04900 LOTS 5 AN 6 E. NETTLETON 2<sup>ND</sup> ADDITION**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **COMMERCIAL**

A5. Latitude/Longitude: Lat. **N35°49'49.92"** Long. **W90°39'55.01"**

Horizontal Datum:  NAD 1927  NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **1**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **N/A** sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **N/A**
- c) Total net area of flood openings in A8.b **N/A** sq in
- d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:

- a) Square footage of attached garage **N/A** sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **N/A**
- c) Total net area of flood openings in A9.b **N/A** sq in
- d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**JONESBORO, CITY OF 050048**

B2. County Name  
**CRAIGHEAD**

B3. State  
**AR**

B4. Map/Panel Number  
**05031C0132**

B5. Suffix  
**C**

B6. FIRM Index Date  
**09/27/1991**

B7. FIRM Panel Effective/Revised Date  
**N/A**

B8. Flood Zone(s)  
**AE**

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)  
**262.50**

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

- FIS Profile  FIRM  Community Determined  Other/Source: **INTERPOLATED**

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
 Designation Date: \_\_\_\_\_  CBRS  OPA

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **JONESBORO CORS** Vertical Datum: **CONVERTED TO NGVD29**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **262.20**  feet  meters
- b) Top of the next higher floor **263.00**  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) **N/A**  feet  meters
- d) Attached garage (top of slab) **N/A**  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **262.27**  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) **261.02**  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) **261.80**  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A**  feet  meters

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

- Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No
- Check here if attachments.

Certifier's Name **DALE ADAMSON**

License Number **1065AR**

Title **OWNER**

Company Name **ADAMSON SURVEYING**

Address **1504 BRANCHWOOD LANE**

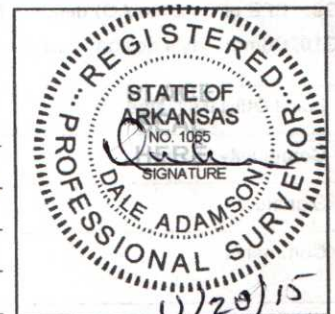
City **JONESBORO**

State **AR** ZIP Code **72404**

Signature 

Date **11/19/2015**

Telephone **870-932-5900**



# Building Photographs

See Instructions for Item A6.

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 3235 MATTHEWS

City JONESBORO

State AR ZIP Code 72401

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

FRONT



# Building Photographs

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
3235 MATTHEWS

City JONESBORO

State AR

ZIP Code 72401

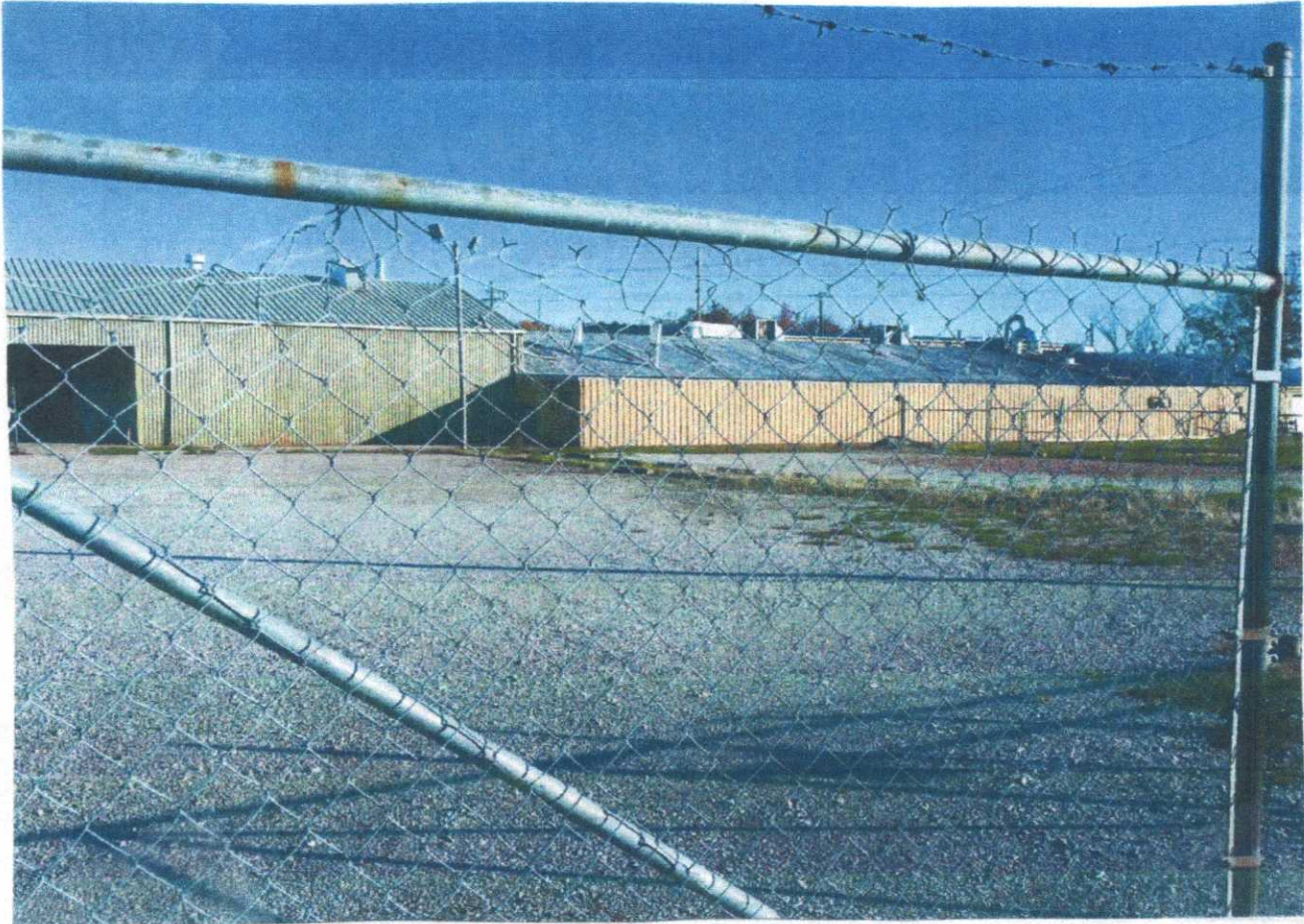
FOR INSURANCE COMPANY USE

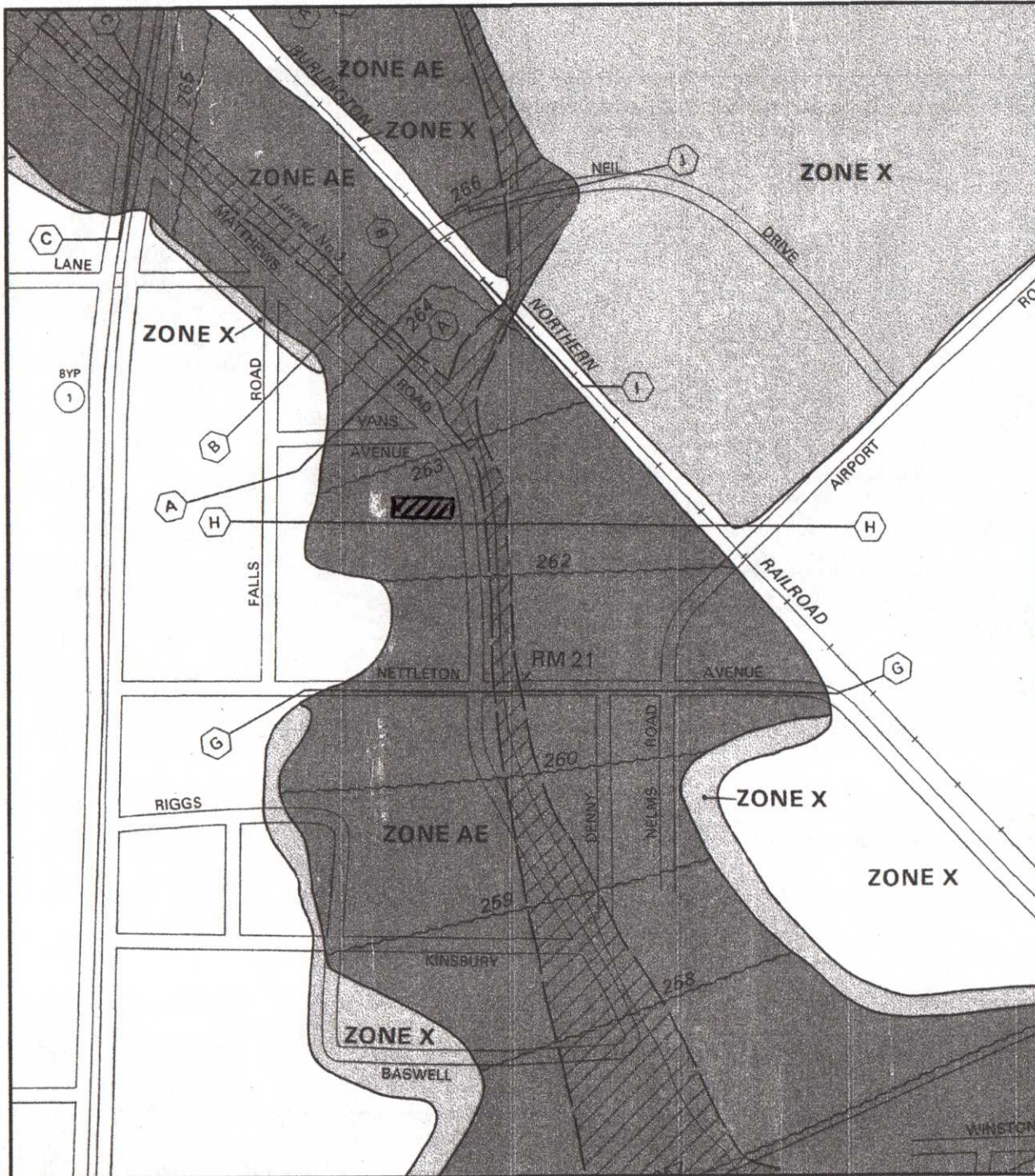
Policy Number:

Company NAIC Number:

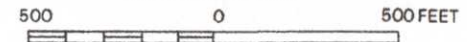
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

BACK





APPROXIMATE SCALE



NATIONAL FLOOD INSURANCE PROGRAM

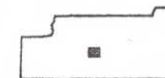
**FIRM**  
FLOOD INSURANCE RATE MAP

**CRAIGHEAD COUNTY,  
ARKANSAS AND  
INCORPORATED AREAS**

**PANEL 132 OF 200**  
(SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS:

| COMMUNITY          | NUMBER | PANEL | SUFFIX |
|--------------------|--------|-------|--------|
| JONESBORO, CITY OF | 050048 | 0132  | C      |



PANEL LOCATION

**MAP NUMBER**  
**05031C0132 C**

**EFFECTIVE DATE:**  
**SEPTEMBER 27, 1991**



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov)

Sketch by Apex IV Windows™

