



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

Planning & Zoning, 300 S. Church Street, Jonesboro, AR 72403 – (870) 932-0406, fax (870) 336-3036 www.jonesboro.org

(OFFICE USE ONLY) PERMIT NO. ISSUED:			DATE:		
Property Information Prospect Village Phase 1			Parcel No. (if known)		
Address: Airport Rd & Prospect Dr.	City				
Zoning Classification:					
Please describe proposed use: Single Family Residential Subdivision					
Applicant's Name (All Correspondence will be returned to this individual): Mark B Morris PE					
Address: PO BOX 1081					
City: Jonesboro	State: AR		ZIP Code: 72403		
Phone: 870-919-7700	Email Address: mark@markmorrishomes.com				
Arkansas Contractor License #:	Privilege #:				
Owner's Name: (If Same, Input Same) MCCM Co	onstruction	ı. Inc.			
MCCM Construction, Inc. Address:					
City:	State:		ZIP Code:		
Phone:	Email Address:	Email Address:			
Asbestos Requirement (State of Arkansas): 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.					
Three (3) Copies of Site Plan: Yes / No (Please circle)	Three (3) Complete 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: Mark Morris P.E.					
Engineer's Certification and Signature: Yes / No (Please circle)		Phone:			
Address:	City:	St	ate:		
Architectural Firm:					
Architect's Certification and Signature: Yes / No (Please circle)		Phone:			
Address:	City: State:		ate:		
CONTRACTED PRICE OF PROJECT: \$					
Flood Plain: Yes / No (Please circle) Flood Zone District:			Flood Zone District:		
Elevation Certificate Required: Yes / No (Please circle)					
FEMA CLOMA/LOMA Required: Yes / No (Please circle)	GF Issuance: Certifica		Certificate #:		

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TYPE OF IMPROVEMENT	T (CHECK ALL THAT APPLY):	PROPOSED USE (CHE	ECK ALL THAT APPLY):	
New Building:		Multi-Family:		
Addition:		Institution:		
Interior Alteration:		Assembly:		
Demolition:		Industrial:		
Moving:		Business:		
Foundation Only:		Storage:		
Change of Use:		Mercantile:		
Sign:		Hazardous:		
Site & Drainage/Grading P	ermit:			
Other: residential subdivision- FINAL APPROVAL				
		FFICE USE ONLY)		
Planners Remarks:				
Fire Inspections Remarks:				
Sanitation Department Remarks:				
Engineering Remarks:				
Building Department Remarks:				
Review Status:				
Zoning Dept.:	Engineering Dept.: Fire	e 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: Mark M	orris Api	signation: olicant/ Engine	Phone/Fax: er 870-919-7700	
Email: mark@markmorrishomes.com				
Signature: Mark B Morris		Date: 5/26/2020		