



**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 II		Parcel No. (if known) _____
Address: PROSPECT ROAD	City	
Zoning Classification: R1		
Please describe proposed use: Single Family Residential Subdivision		
Applicant's Name (All Correspondence will be returned to this individual): Mark B Morris		
Address: PO BOX 1081		
City: Jonesboro	State: AR	ZIP Code: 72403
Phone: 870-919-7700	Email Address: mark_b_morris@yahoo.com	
Arkansas Contractor License #:	Privilege #:	
Owner's Name: (If Same, Input Same) MARIO ALVARADO- MCCM CONSTRUCTION, INC		
Address:		
City:	State:	ZIP Code:
Phone:	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.F.		
Engineer's Certification and Signature: Yes / No (Please circle)		Phone:
Address:	City:	State:
Architectural Firm:		
Architect's Certification and Signature: Yes / No (Please circle)		Phone:
Address:	City:	State:
CONTRACTED PRICE OF PROJECT: \$		
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 #:

(Please sign Page 2)

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TYPE OF IMPROVEMENT (CHECK ALL THAT APPLY):	PROPOSED USE (CHECK 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 Permit:	

Other: **PRELIMINARY APPROVAL -RESIDENTIAL SUBDIVISION**

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.:
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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 : **Mark Morris** Designation: **ENGINEER** Phone/Fax: **870-919-7700**

Email: **mark_b_morris@yahoo.com**

Signature: *Mark B Morris* Date: **1/27/2021**