



**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

(OFFICE USE ONLY) PERMIT NO. ISSUED:		DATE:
Property Information		Parcel No. (if known) _____
Address: E. Parker Road (911 Address Not Yet Assigned)	City Jonesboro	
Zoning Classification: Planned Mixed Use Area (PMUA)		
Please describe proposed use: Wireless Cellular Tower		
Applicant's Name: Westtower, LLC (by SiteExcell, LLC, its authorized agent)		
Address: (Westtower, LLC) 4300 Stockton Drive		
City: North Little Rock	State: AR	ZIP Code: 72217
Phone: (Scott Lewellen - SiteExcell Agent) 501-231-7800	Email Address: (Scott Lewellen - SiteExcell Agent) scott@siteexcell.com	
Arkansas Contractor License #: 0091630414	Privilege #:	
Owner's Name: (If Same, Input Same) MoBeMe, LLC, by its authorized agent, Elizabeth Moore		
Address: 3206 Rook Road		
City: Jonesboro	State: AR	ZIP Code: 72404
Phone: 870-219-5263	Email Address: sismoore@suddenlink.net	
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: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)	Three (3) Complete Set of Construction Documents: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)	
Type of Construction: Cellular Tower	Code Review Included: Yes / No (Please circle)	
Seismic Zone #3 Signed Certification: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)		
Engineering Firm: Central Arkansas Surveying, Inc.		Phone: 501-223-0497
Engineer's Certification and Signature: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)		
Address: 11708 Kanis Road	City: Little Rock	State: AR
Architectural Firm: N/A		Phone:
Architect's Certification and Signature: Yes <input type="radio"/> No <input checked="" type="radio"/> (Please circle) N/A		
Address:	City:	State:
CONTRACTED PRICE OF PROJECT: \$ 145,000.00		
Flood Plain: Yes <input type="radio"/> No <input checked="" type="radio"/> (Please circle)	Flood Zone District:	
Elevation Certificate Required: Yes <input type="radio"/> No <input checked="" type="radio"/> (Please circle)		
FEMA CLOMA/LOMA Required: Yes <input type="radio"/> No <input checked="" type="radio"/> (Please circle)	GF Issuance:	Certificate #:

(Please sign Page 2)

APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2

TYPE OF IMPROVEMENT:	PROPOSED USE:
New Building: Wireless Cellular Tower (Unmanned)	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:

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 : Scott Lewellen, SiteExcell, LLC
(Agent for Westover, LLC)

Designation: Applicant

Phone/Fax: 501-231-7800

Email: scott@siteexcell.com

Signature:

Date:

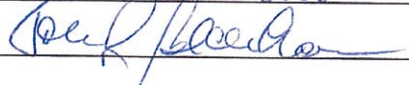
Property Owner Signature Page

APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2			
TYPE OF IMPROVEMENT:		PROPOSED USE:	
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:			
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 : MoBeMe, LLC by its authorized agent, Elizabeth Moore		Designation: Property Owner	Phone/Fax: 870-219-5263
Email: sismoore@suddenlink.net			
Signature: <i>Elizabeth Moore</i>		Date: <i>3/18/14</i>	

Tower Developer Signature Page

APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2			
TYPE OF IMPROVEMENT:		PROPOSED USE:	
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:			
COMMENTS (OFFICE USE ONLY)			
Planners Remarks:			
Fire Inspections Remarks:			
Sanitation Department Remarks:			
Engineering Remarks:			
Building Department Remarks:			
Review Status:			
Zoning Dept.:	Engineering Dept.:	Fire Marshal:	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 : <i>Orazio Russo</i>	Designation: Tower Developer	Phone/Fax: <i>973-544-6817</i>	
Email: <i>ORUSSO@diamondcomm.com</i>			
Signature: <i>Orazio Russo</i>		Date: <i>3/14/14</i>	

Wireless Carrier Signature Page

APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2			
TYPE OF IMPROVEMENT:		PROPOSED USE:	
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:			
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.			
As designated agent of AT&T			
Print Name: JOHN R BEACHAM	Designation: Wireless Carrier	Phone/Fax: 501 260 7633	
Email: JBEACHAM@WESTOWER.COM			
Signature: 		Date: 3/13/14	