



**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: 7/14/16
Property Information		Parcel No. (if known)
Address: 210 Cate	City: Jonesboro	
Zoning Classification: Industrial → Trying to Change to C-1		
Please describe proposed use: Barbershop / Clothing Retail - Conforms with Neighboring Properties		
Applicant's Name: Christopher B. Posey		
Address: 5609 Crowleys Ridge		
City: Jonesboro	State: AR	ZIP Code: 72404
Phone: (870) 219-6796	Email Address: romantouch33@yahoo.com	
Arkansas Contractor License #:	Privilege #:	
Owner's Name: (If Same, Input Same) Same		
Address: Same		
City: Same	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 / <input checked="" 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 / 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: Matt Silas - original Plans		
Architect's Certification and Signature: Yes / No (Please circle)		Phone: (870) 268-0500
Address:	City:	State:
CONTRACTED PRICE OF PROJECT: \$ 60,000.00		
Flood Plain: Yes / <input checked="" type="radio"/> No (Please circle)		Flood Zone District:
Elevation Certificate Required: Yes / <input checked="" type="radio"/> No (Please circle)		
FEMA CLOMA/LOMA Required: Yes / <input checked="" type="radio"/> No (Please circle)	GF Issuance:	Certificate #:

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TYPE OF IMPROVEMENT:	PROPOSED USE:
New Building:	Multi-Family:
Addition:	Institution:
Interior Alteration: <i>Plumbing Interior Buildout</i>	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.:
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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 : <i>Christopher B. Posey</i>	Designation:	Phone/Fax: <i>219-6796</i>
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Email: *romantouch33@yahoo.com*

Signature: <i>[Signature]</i>	Date: <i>7.14.16</i>
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