



## APPLICATION FOR RESIDENTIAL BUILDING & ZONING PERMIT APPLICATION

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> SFR 18-211		<b>DATE:</b> 04.16.18	
<b>Property Information</b>		Parcel No. (if known) 01-14464-10600	
Address: 313 S. Hunter Lane	City: Jonesboro		
Zoning Classification: R-1			
Please describe proposed use: Single Family Residence			
<b>Applicant's Name:</b> C3, LLC			
Address: 2700 Ridgepointe Drive			
City: Jonesboro	State: AR	ZIP Code: 72404	
Phone: 870-919-4028	Email Address: statonandassociates@gmail.com		
Arkansas Contractor License #:		Privilege #:	
<b>Owner's Name:</b> (If Same, Input Same)			
Address: SAME			
City:	State:	ZIP Code:	
Phone:	Email Address:		
One (1) Copy of Site Plan: Yes / No (Please circle)			
One (1) Set of Construction Documents: Yes / No (Please circle)			
Type of Construction: SFR		Code Review Included: Yes / No (Please circle)	
Seismic Zone #3 Signed Certification: Yes / No (Please circle)			
Engineering Firm: N/A			
Engineer's Certification and Signature: Yes / No (Please circle)		Phone:	
Address:	City:	State:	
Architectural Firm/Plans Drawn By: Glenn Smith			
Architect's Certification and Signature: Yes / No (Please circle)		Phone:	
Address:	City:	State:	
CONTRACTED PRICE OF PROJECT: \$ 183,000			
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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<b>TYPE OF IMPROVEMENT:</b> SFR		<b>PROPOSED USE:</b>	
New Building: <input checked="" type="checkbox"/>		Multi-Family: <i>No.</i>	No of Units: <i>1</i>
Addition:		Institution:	
Alteration:			
Demolition:		Temporary Structure:	
Moving:		Home Occupation: <i>SFR</i>	
Foundation Only:		Storage Shed: <i>No</i>	
Pool:		Fence: <i>No</i>	
Accessory Apartment:		Pool House: <i>No</i>	
Other:			
COMMENTS (OFFICE USE ONLY)			
Planners Remarks:			
Engineering Remarks:			
Building Department Remarks:			
Review Status:			
Zoning:	Engineering:	Building:	C.O. Issuance Date:
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 : Stan Staton		Designation: Owner	Phone/Fax: 870-919-4028
Email: statonandassociates@gmail.com			
Signature: <i>Stan Staton</i>		Date: <i>04/16/18</i>	



**OWNER/BUILDER AFFIDAVIT  
CITY OF JONESBORO, ARKANSAS**

Ark. Code Ann. §17-25-501 et seq. requires a residential license for certain residential buildings.

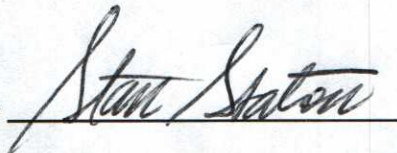
A property owner who acts as a residential building contractor for the purpose of constructing his own residence is not required to have a residential building license to make application for a building permit of a single family residence that is intended to be the property owners residence, unless the property owner constructs more than one residence per calendar year.

**PROPERTY ADDRESS** 313 S. Hunter Lane

Now, on this 16th day of April, 2018. I, Stan Staton  
(Please print your name)

declare that I am applying for a building permit for the above described property; that I will be responsible for performing the work and meeting the requirements of all codes, ordinances, and laws; that I am the owner of the above described property; that I am an occupant of the property; and that the intent of the use of the property is by the owner as a single family residence. Therefore, I am not required to have a residential building license.

**Owner's Signature**



**Date**

04/16/2018