



**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

<b>(OFFICE USE ONLY) PERMIT NO. ISSUED:</b>		<b>DATE:</b> 4.4.18
<b>Property Information</b>		Parcel No. (if known)
Address:	1411 Franklin St	City Jonesboro
Zoning Classification:		
Please describe proposed use: Remove existing 47 foot tower & replace with 100 ft tower		
Applicant's Name: The Voice of Arkansas Minority Advocacy Council		
Address: 1411 Franklin Street		
City: Jonesboro	State: AR	ZIP Code: 72401
Phone: 870-203-9951	Email Address: kkek@klekcfm.org	
Arkansas Contractor License #:	Privilege #:	
Owner's Name: (If Same, Input Same) Johnny L BERRY		
Address: 4112 OAK HILL		
City: Jonesboro	State: AR	ZIP Code: 72401
Phone: 870 932 5176	Email Address: JLBERRY@MEDIA99.com	
<b>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.</b>		
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:		
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: \$ 25,080.00		
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 #:

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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: Radio broadcast tower

**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 : <u>L. Ganzie Kale</u>	Designation:	Phone/Fax: <u>870-203-9951</u>
Email: <u>klek@klekfm.org</u>		
Signature: <u>[Signature]</u>	Date: <u>3-29-18</u>	