



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:		
Dranaviu Information			Parcel No. (if known)		
Property Information Eden Hills Estate	Phase 2				
Address: Peachtree Ave.	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) (same)					
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.E.					
Engineer's Certification and Signature: Yes / No (Please circle)		Phone:			
Address:	City:	Stat	e:		
Architectural Firm:					
Architect's Certification and Signature: Yes / No (Please circle)		Phone:			
Address:	City: State		e:		
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 #:		

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TYPE OF IMPROVEMEN	T (CHECK ALL THAT APPLY):	PROPOSED USE (CH	PROPOSED USE (CHECK ALL THAT APPLY):		
New Building:		Multi-Family:	Multi-Family:		
Addition:		Institution:	Institution:		
Interior Alteration:		Assembly:	Assembly:		
Demolition:		Industrial:	Industrial:		
Moving:		Business:	Business:		
Foundation Only:		Storage:	Storage:		
Change of Use:		Mercantile:	Mercantile:		
Sign:		Hazardous:	Hazardous:		
Site & Drainage/Grading Po	ermit:				
Other: residential subdivision					
	COMMENT	S (OFFICE USE ONLY)			
Planners Remarks:					
Fire Inspections Remarks:					
Sanitation Department Remarks:					
Engineering Remarks:					
Building Department Remarks:					
Review Status:	T		1		
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: Mark M	lorris	Designation: OWNEr	Phone/Fax: 870-351-1226		
Email: mark_b_morris@yahoo.com					
Signature: Mark B Morris		Date: 8/28/19			