

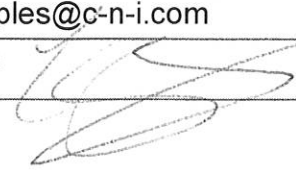


**APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT
- INCLUDES MULTI-FAMILY 3+ UNITS**

Planning & Zoning, 300 South Church Street, 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: 3700 East Johnson Ave		City: Jonesboro	
Zoning Classification: commercial			
Please describe proposed use: commercial			
Applicant's Name (All Correspondence will be returned to this individual): CONSTRUCTION NETWORK INC			
Address: 6009 Dalton Farmer Drive			
City: JONESBORO		State: AR	ZIP Code: 72404
Phone: 870-972-5632		Email Address: Casey Caples, ccaples@c-n-i.com	
Arkansas Contractor License #: 0038750721		Privilege #: conet01	
Owner's Name: (If Same, Input Same) Vision2000, Inc			
Address: po box 1654			
City: Jonesboro		State: AR	ZIP Code: 72403
Phone: 870-930-7841		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: <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: Commercial		Code Review Included: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)	
Seismic Zone #3 Signed Certification: Yes / No (Please circle)			
Engineering Firm: Crockett Engineering Consultants			
Engineer's Certification and Signature: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)		Phone: 573-447-0292	
Address: 1000 W Nifong Blvd, Bldg 1		City: Columbia	State: MO
Architectural Firm: Cripe Architectural			
Architect's Certification and Signature: <input checked="" type="radio"/> Yes / <input type="radio"/> No (Please circle)		Phone: 317-844-6777	
Address: 3939 Priority Way South, STE200		City: Indianapolis	State: IN
CONTRACTED PRICE OF PROJECT: \$ 3.25 Million			
Flood Plain: Yes <input checked="" type="radio"/> No (Please circle)		Flood Zone District:	
Elevation Certificate Required: Yes / No (Please circle)			
FEMA CLOMA/LOMA Required: Yes / No (Please circle)		GF Issuance:	Certificate #:

APPLICATION FOR COMMERCIAL BUILDING & ZONING PERMIT APPLICATION PAGE 2

TYPE OF IMPROVEMENT (CHECK ALL THAT APPLY):		PROPOSED USE (CHECK ALL THAT APPLY):	
New Building: <input checked="" type="checkbox"/>		Multi-Family:	
Addition:		Institution:	
Interior Alteration:		Assembly:	
Demolition:		Industrial:	
Moving:		Business: <input checked="" type="checkbox"/>	
Foundation Only:		Storage:	
Change of Use:		Mercantile:	
Sign: <input checked="" type="checkbox"/>		Hazardous:	
Site & Drainage/Grading Permit: <input checked="" type="checkbox"/>			
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 : Casey Caples		Designation: estimator	Phone/Fax: 870-930-7853
Email: ccaples@c-n-i.com			
Signature: 		Date: 2-26-21	



Planning Charge Sheet

Residential Approvals – Planning Review (select all that apply) **01-0731:**

- | | | |
|---|--|--|
| <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Multiple Family Dwelling | <input type="checkbox"/> Detached/Accessory Bldg |
| <input type="checkbox"/> Single Family Additions | <input type="checkbox"/> Single Family Alterations | <input type="checkbox"/> Swimming Pools |
| <input type="checkbox"/> Walls, Fences, Decks Etc | <input type="checkbox"/> Multi Family Additions | <input type="checkbox"/> Multi Family Accessory Bldg |

Commercial Approvals – Planning Review (select all that apply) **01-0732:**

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Building _____ Sqft. | <input type="checkbox"/> Interior Alterations/Repairs | <input type="checkbox"/> Awnings/Canopies |
| <input type="checkbox"/> Accessory Bldgs, etc. | <input type="checkbox"/> Parking Lots | <input type="checkbox"/> Landfill and Extraction |
| <input type="checkbox"/> Gravel Mining | <input type="checkbox"/> Change of Use | <input type="checkbox"/> Storage Tanks |
| <input type="checkbox"/> Temp Tents, Trailers & Structures | | <input type="checkbox"/> Fences |

Residential Zoning Districts : (Zoning Map Amendments) **01-0516:**

- ☐ Single Family Districts _____ Acres
- ☐ Multi Family Districts _____ Acres

Non-Residential Zoning Districts : (Zoning Map Amendments) **01-0516:**

- ☐ Zoning Map Amendments _____ Acres

Special District Applications **01-0516:**

- ☐ Village Residential Overlay ☐ JMA-O, Jonesboro Municipal Overlay District
- ☐ Planned Development District _____ phase (preliminary, final, modification)

Board of Zoning Appeals Fee **01-0516:**

- ☐ Residential ☐ Commercial ☐ Conditional Use ☐ Compatible Non-Conforming Use

Subdivision Planning Fees **01-0733:**

- ☐ Minor Plats & Replats ☐ Reviews MAPC Approval: _____ Lots _____ Acres

On/Off-Premise Signage Permits – Planning Review **01-0734:**

- | | | |
|--|---|--|
| <input type="checkbox"/> Billboards | <input type="checkbox"/> High Rise Interstate _____ faces | <input type="checkbox"/> Bulletin Board _____ Sqft |
| <input type="checkbox"/> Construction Sign | <input type="checkbox"/> Ground Sign _____ Sqft | <input type="checkbox"/> Wall & Awning _____ Sqft |
| <input type="checkbox"/> Directional Sign _____ Sqft | <input type="checkbox"/> Pole Sign _____ Sqft | <input type="checkbox"/> Marquee Sign _____ Sqft |
| <input type="checkbox"/> Promo Event | <input type="checkbox"/> Special Event Sign | <input type="checkbox"/> Grand Opening Sign |
| <input type="checkbox"/> Corner or Interior Parcel Sign _____ Sqft | Faces _____ | |

Zoning Sign Deposit **01-0155:** ☐ _____ Number of Signs

Mapping and Duplicating Services Per Page **01-0735:**

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 8 ½" x 11" BW Copies | <input type="checkbox"/> 8 ½" x 11" Color Map | <input type="checkbox"/> Over Size Page | <input type="checkbox"/> Zoning Resolution |
| <input type="checkbox"/> Zoning Map 36"x50" | <input type="checkbox"/> Land Use (36"x44") | <input type="checkbox"/> 11"x17" Map | |
| <input type="checkbox"/> Property Owner Search/Plat Map | | <input type="checkbox"/> Zoning Certification Letter | |

Third Submittal Reviews:

- ☐ Multi-Family Dwelling Review **01-0731** ☐ Commercial / Industrial Review **01-0732**

Right-Of-Way Fee **01-0736:**

- ☐ Right-of-Way Fee

Description: New Total Amount Due: \$ 500

Site: Address: 3700 E. Johnson Tracking No.: SP 21-55

Construction Network Q.C.P.

Customer

Customer #

City Official

Date

2/26/21