

OFFICE USE ONLY

PZE # _____

Date Submitted _____

Commercial Building Permit Application**Multi Family projects have a separate application**

Items needed to submit:

- 1) Plans in PDF format on CD or USB drive
- 2) AR State Plumbing Letter (Health Dept.)
- 3) AR Food Service Letter (Health Dept.)
- 4) Plan Review Fee (1/4 permit fee based on value of project)

Commercial Projects: (Mark X on (1) category)		Accessory Building	New Commercial Building	Deck/Ramp	Impervious Surface	Non-Electric Fence/Retaining Wall	Electric Fence
Other: _____	Fire Rehab/Repair	Repairs/Tenant Finish/Remodel (not fire)	Pools	Room Addition	Roof	Tanks/ Tents/ Towers	Solar Panels

Applicant: _____ Address: _____

City: _____ State: _____ Zip: _____

Owner: _____ Project Name: _____

Project Value: \$ _____ Project Address: _____

Total Sq Ft (NEW BUILDING AND IMPERVIOUS SURFACE ONLY) _____

Total Linear Ft (NEW CELL TOWERS ONLY) _____

The following items require a separate review and Permit:

Swimming Pools, Decks, Fences, Retaining Walls, and Signs

DESCRIPTION OF ALL WORK:

INCLUDE FIRE DAMAGE, INTERIOR/EXTERIOR, ADDITION, ACCESSORY & OTHER PROPOSED WORK

☐

Initial here if due to fire

☐

Initial here if no plumbing work to be done

Signature: _____ Print Name: _____

Phone: (____) _____ - _____ Email: _____

Plan Reviewer Notes:

Initials: _____ Date: _____

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Plan Review Fee: \$ _____ Date: _____

Permit Fee: \$ _____ Date: _____

Pymt Type: _____ Ck# _____ CC: _____ CASH

Clerk: _____