



Residential Single Family & Duplex

Office Use Only:Approved: Yes No

Approved by: _____

Date: _____

Application & Checklist

Please fill out this form completely, supplying all necessary information and documentation to support your request. Your application will not be processed until the application is completed and required documentation provided.

CONTRACTOR INFORMATION:

 Please check if information has changed.

Contractor: _____ Contact Person: _____

Phone # _____ Mobile # _____ Fax # _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

E-Mail Address: _____

State Contractor's License # _____ Expiration Date: _____

PROPERTY INFORMATION:

Owner: _____ St. Address: _____ Phone # _____

Zoning: A-1 R-1 R-1B R-2 R-3 R-E R-MH (Check one box only)

BUILDING INFORMATION:

Total Heated SF: Garage SF: Unfinished Basement SF: **TOTAL SF:** # Bedrooms: # Bathrooms: Foundation: Height of Bldg: # of Stories: H2O Meter Size: # H2O Meters: Termite Treatment: Slab Framing

LIST OF SUB-CONTRACTORS:

Electrician: _____ Heat/Air: _____

Insulation: _____ Plumber: _____

Termite Co: _____ Other: _____

SUBMITTAL CHECKLIST:

- 1. Application form.
- 2. Site plan drawn to an Engineers scale (1'=10,20,30, etc). (must include lot dimensions, setbacks, easements, utility connections.)
- 3. Building drawings. (must include floorplan and elevations)

A PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED, OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS STARTED.

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I understand inspections by City Inspectors will be made only to determine compliance with construction codes and not to assist the owner in properly locating the structure. I acknowledge my responsibility to insure, by boundary line survey if necessary, that the location of the structure will conform to setback requirements of the Little Flock Zoning Ordinance. I understand granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Date _____

(SIGNATURE OF OWNER, CONTRACTOR OR AUTHORIZED AGENT)

Note: Inspection of permitted work may reveal code violations not discovered during plan review.

REV: March 2015