



215 E CENTRAL
 BENTONVILLE, AR 72712
 Office: 479-271-1003
 Text: 475-522-1003
 Email: permits@bentoncountyar.gov

Commercial Permit Application

Step 1: Have you had your DRC meeting? Contact the BC Planning Department to arrange your meeting – 479-464-6166.

Step 2: Do you have your BC Planning Board Approval? Contact the BC Planning Department to arrange your meeting – 479-464-6166

Step 3: Have you had your pre-construction meeting with the BC Building Safety Department? Contact Building Safety at 479-271-1003 to arrange a meeting.

Parcel # _____

PRIMARY CONTACT: Owner Contractor

PROPERTY OWNER INFORMATION

Property Owner Name: _____
 Project Address: _____ City: _____ Zip: _____
 Phone: _____ Email: _____

I the undersigned will be responsible for performing the work and meeting the requirements of all codes, ordinances, and laws; and that I am the owner of the above-described property.
 _____ Property Owner Signature _____ Date

BUILDING INFORMATION

New Construction Addition Move-On Structure Remodel

Project Cost: (Remodels only) _____ Total SF: _____
 Building Use: _____ Number of Stories: _____
 Building Height: _____

Construction Type: IA IB IIA IIB IIIA IIIB IV VA VB
 Occupancy Use: A-1 A-2 A-3 A-4 B E F-1 F-2 H-1
 H234 H-5 I-1 I-2 I-3 I-4 M R-1 R-2
 R-3 R-4 S-1 S-2 U

If mixed Occupancy Use, will use be: Separated Non-Separated
 Additional Occupancy Use if mixed use: _____ SF of each Occupancy Use _____
 Sprinklers: Yes No Sprinkler Type: NFPA 13n NFPA 13D NFPA 13R

CONTRACTOR INFORMATION

General Contractors Name: _____ Primary Contact: _____
 Phone: _____ Email: _____ Lic. # _____
 A copy of all licenses must be provided with each new project.

UTILITY INFORMATION

Septic Sewer
 Elec. Provider: _____ Water Provider _____ Gas Provider _____

Note: This 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 commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of the Law and Ordinances governing this type of work will be complied with whether specified herein or not. The 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. Permit fees are non-refundable.
 _____ Owner/Contractor Signature _____ Date

COMMERCIAL PERMIT REQUIREMENTS

CODE STUDY ANALYSIS

(To establish valuation)

If Valuation is under
\$250,000

- APPLICATION
- COMPUTER GENERATED PLANS (not stamped)
- SITE PLAN
- SEPTIC APPROVAL
- STATE PLUMBING LETTER
- MANUAL N
- FIRE LIFE SAFETY PLAN
- CONTRACTOR LICENSES
- PLANNING BOARD APPROVAL

REMODELS ONLY

- ASBESTOS REPORT
- SCOPE OF WORK
- ESTIMATED PROJECT COST

FIRE AND BUILDING PLAN REVIEW

If Valuation is over
\$250,000

- APPLICATION
- STAMPED ARCHITECTURAL PLANS
- STAMPED ARCHITECTURAL PLANS FOR MECHANICAL, PLUMBING AND ELECTRICAL
- STATE PLUMBING LETTER
- SEPTIC APPROVAL
- FIRE LIFE SAFETY PLAN
- SITE PLAN
- CONTRACTOR LICENSES
- PLANNING BOARD APPROVAL

REMODELS ONLY

- ASBESTOS REPORT
- SCOPE OF WORK
- ESTIMATED PROJECT COST

FIRE AND BUILDING PLAN REVIEW

If Occupancy Group is A/E/I

AND/OR
OVER 5000 SF,
MORE THAN 50 OCCUPANT LOAD,
3 STORIES OR MORE.

- APPLICATION
- STRUCTURAL ENGINEERED PLANS
- STAMPED ENGINEERED PLANS FOR MECHANICAL, PLUMBING AND ELECTRICAL
- STATE PLUMBING LETTER
- SEPTIC APPROVAL
- FIRE LIFE SAFETY PLAN
- SITE PLAN
- CONTRACTOR LICENSES
- PLANNING BOARD APPROVAL

REMODELS ONLY

- ASBESTOS REPORT
- SCOPE OF WORK
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FIRE AND BUILDING PLAN REVIEW