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BENTONVILLE, AR 72712

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## Residential Application

### BEFORE APPLYING FOR YOUR NEW HOME PERMIT

Check with 911 Administration for address: 479-271-1085

Check with Road Department for driveway: 479-271-1052

Check with Health Department for Septic: 479-986-1300

### Checklist:

Application  Septic Approval  Contractor License

Site Plan (must show property lines, distance from structure to each property line and to the center of the road)

Building Plans Please include a floorplan showing dimensions, room designation labels, window and door locations with sizes, plumbing fixtures, heated/cooled square footage, garage/utility square footage, unfinished basement square footage, and smoke detector locations. Also, please provide exterior elevations of all sides of the structure. We prefer computer generated plans, but will accept hand drawn plans as long as they are drawn to scale and legible. For remodels, we require plans showing the current floorplan and proposed plan as well as a detailed scope of work. No documents larger than 11x17 will be accepted.

\*\*Certain projects may require documentation of a functioning septic.

Parcel # \_\_\_\_\_

Description of work: \_\_\_\_\_

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

General Contractors Name: \_\_\_\_\_ Primary Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Lic. # \_\_\_\_\_

A copy of all licenses must be provided with each new project.

- New Home
- Barndominium/Shouse
- Accessory Building with H/C Living Space
- Addition
- Remodel (must submit plans and scope of work being done).

### EXTERIOR FRAMING TYPE:

Wood (poles, 2x4 or 2x6) CIRCLE ONE

Metal (pre-engineered)

Concrete (ICF)

Spray Foam Insulation

(Must submit ICC ESR Report before framing inspection)

### FOUNDATION TYPE: CIRCLE ONE (slab, crawl, basement)

Stem Wall- slab, crawl, basement

Block (CMU)- slab, crawl, basement

Monolithic slab

Piers

Post frame

Heated SF: \_\_\_\_\_ Garage SF: \_\_\_\_\_

Unfinished Basement SF: \_\_\_\_\_ Total SF: \_\_\_\_\_

# Bedrooms: \_\_\_\_\_ # Bathrooms: \_\_\_\_\_ # Stories: \_\_\_\_\_

\*Exterior of building to remain uncovered until framing inspection. Extra \$50 inspection fee for exterior house wrap inspection.

Sewer  Septic

MUST PROVIDE PROOF OF A PRIVATE COLLECTION/DISPOSAL SEPTIC SYSTEM FOR: New or Remodeled Dwellings, Garage/Shops with bathroom, H/C or Bathroom Additions, Mobile Homes, Accessory Buildings with bathrooms.

Water Provider \_\_\_\_\_

Benton County does not inspect BCWD#1, Cave Springs, Garfield, Gateway, Gentry, LV, Lincoln, Madison Co., Pea Ridge, Siloam Springs, Springdale and Washington County Water Utility Providers.

Elec. Provider: \_\_\_\_\_

Benton County does not inspect Siloam Springs Utility 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



# Residential Application

## Checklist:

**Application:** Complete residential permit application

**Septic Approval:** Issued by the Arkansas Department of Health. Please submit the full permit, including the septic layout plan. If the approval date in box 21 is older than one year, the permit has expired and will need to be revalidated. **\*If you will be connecting to an existing septic system, we will need a copy of the approved permit from when the system was installed.** If this is not available, we will also accept a report stating that there is an existing, functioning septic on your property. This report can be completed by a septic installer or a plumber licensed in the state of Arkansas.

**Contractor Licenses:** If we do not have the current license in our data base, please submit a copy showing name, type, license number, and expiration date.

**Site Plan:** The site plan should include: Property lines, existing structures, proposed new structures/additions, distances from each property line to the closest point of new structure, distance from the center of the road to the closest point of new structure.

**Building Plans:** Please include a floorplan showing dimensions, room designation labels, window and door locations with sizes, plumbing fixtures, heated/cooled square footage, garage/utility square footage, unfinished basement square footage, and smoke detector locations. Also, please provide exterior elevations of all sides of the structure. We prefer computer generated plans, but will accept hand drawn plans as long as they are drawn to scale and legible. For remodels, we require plans showing the current floorplan and proposed plan as well as a detailed scope of work. No documents larger than 11x17 will be accepted.

**Parcel #:** A unique 10-digit number assigned to parcel of property by the tax assessor

**Description of work:** A brief explanation of proposed scope of work

**Primary Contact:** Who would be the best person to contact for questions pertaining to the permit/project

## PROPERTY OWNER INFORMATION

**Property Owner name:** Name of person who is listed as the legal owner of record of the property where the project is taking place. If the property was just purchased and the new owner is not yet reflected in Benton County property records, a recorded deed showing transfer of ownership will be required.

**Project address:** The address assigned by 911 Administration for the property where proposed the project is taking place

**City:** City associated with project Address

**Zip:** Zip code associated with project Address

**Phone:** Phone number for property owner

**Email:** Email address for property owner

**Property Owner Signature:** Signature of the property owner of record. This only needs to be signed if the property owner is acting as their own contractor

**Date:** This only needs to be completed if the property owner is acting as their own contractor

## CONTRACTOR INFORMATION

**General Contractor Name:** The name of the person/company who will be overseeing the project

**Primary Contact:** Name of the best direct person to contact about the project

**Phone:** Telephone number of the best direct person to contact about the project

**Email:** Email address for the best direct person to contact about the project

**Lic #:** License number from the contractor license issued by The Arkansas Contractors Licensing Board

## BUILDING INFORMATION

**New Home, Barndominium/Shouse, Accessory Building with H/C living space, Addition, Remodel:** Check the box that best corresponds with the proposed project

**Heated SF:** Total enclosed space that is heated and cooled

**Garage SF:** Total enclosed space that will be for utility/garage use

**Unfinished Basement SF:** Total enclosed space that will be used as unfinished basement space

**Total SF:** Total square footage of enclosed space that include heated/cooled, garage and unfinished basement

**# Bedrooms:** Total number of bedrooms in proposed project

**# Bathrooms:** Total number of bathrooms in proposed project

**# Stories:** Total number of stories for the proposed project

**Exterior framing type:** Check the box of the correct material being used for the framing and circle the correct size of material (if applicable)

**Spray foam Insulation:** Check this box if you will be using spray foam insulation

**Foundation type:** Check the box of the correct material being used and circle the specific type of foundation (if applicable)

## UTILITY INFORMATION

**Septic or Sewer:** Check the correct box depending on what type of waste disposal system the proposed project will be utilizing

**Electric Provider:** The electric utility company providing service to the property

**Water Provider:** The water utility company providing service to the property

**Signature Line:** Must be signed by whoever is submitting the application for review

**Date:** Date the application was signed