CITY OF LITTLE ROCK
DEPARTMENT OF PLANNING & DEVELOPMENT
BUILDING CODES DIVISION
723 WEST MARKHAM, 2ND FL
LITTLE ROCK, AR 72201

COMMERCIAL BUILDING INSPECTOR (501)371-4827
RESIDENTIAL INSPECTORS (501)371-4833 OR (501)371-4834
PERMIT DESK (501)371-4805 OR (501)371-4832
FAX (501)371-4546

PLAN NO.

APPLICATION FOR:
BUILDING PERMIT

OFFICIAL USE ONLY

PERMIT NO. **2018**_____

DATE ISSUED _____

ISSUED BY _____

SUBDIVISION COVENANTS AND RESTRICTIONS NOTICE
The City gives permission for this project in accordance with local ordinances. However, there may be subdivision covenants and restrictions that apply, and this permit does not void or override those covenants and restrictions.

RESIDENTIAL BUILDING CONTRACTOR NOTICE
It shall be the responsibility of the Building Contractor of One or Two Family Dwellings to provide adequate exhaust and ventilation to all stovetop and range top cooking appliances, including proper CFM requirements.
Any single family vent-a-hood that exceeds 400 CFMs is required, by Code, to provide makeup air, from outside, with a filter, and will be inspected by the City.

PROJECT ADDRESS:_____

LEGAL DESCRIPTION: LOT_____ BLOCK_____ SUBDIVISION_____

OWNER/TENANT:_____ TELEPHONE:_____

  ADDRESS:_____

CONTRACTOR: _____ LICENSE NO.:_____

  ADDRESS:_____ TELEPHONE/FAX: _____

ARCHITECT: _____ PERMIT HOLDER EMAIL _____

  ADDRESS: _____ TELEPHONE/FAX: _____

ENGINEER: _____ LICENSE NO.:_____

ADDRESS: _____ TELEPHONE/FAX: _____

CLASS OF WORK: NEW   ADDITION   REPAIR   ALTERATION   MOVE   DEMOLISH   ACCESSORY   TEMPORARY

PROPOSED USE (OCCUPANCY): _____

SQUARE FEET (UNDER ROOF)_____ VALUATION OF WORK:_____

NO. OF BUILDINGS: _____ NO. OF UNITS:_____ NO. OF FLOORS_____

DESCRIPTION OF WORK: _____

NOTICE: SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, GAS, PLUMBING AND MECHANICAL WORK.
I hereby certify that the data submitted on or with this application is true and correct. Also, I have read and understand the Subdivision Covenants and Restrictions Notice, as well as the ventilation requirements, as stated above. Any deviation from information contained herein unless Approved by the Building Official will render this permit null and void.

_____   _____

SIGNATURE OF APPLICANT   DATE   REV 6/30//15

_____

PRINT NAME   EMAIL ADDRESS   CELL PHONE