



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

PHONE (501) 371-4832 OR (501) 371-4805  
 FAX: (501) 371-4546

APPLICATION FOR:  
**MISCELLANEOUS PERMIT**

**OFFICIAL USE ONLY**

**\*\*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.

PERMIT NO. **2018** \_\_\_\_\_  
 DATE ISSUED \_\_\_\_\_  
 ISSUED BY \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

OWNER/TENANT: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ LICENSE NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ TELEPHONE/FAX \_\_\_\_\_

OCCUPANCY: \_\_\_\_\_

VALUATION OF WORK: (LABOR AND MATERIAL) \_\_\_\_\_

PERMIT TYPE: \_\_\_\_\_ FENCE & WALL \_\_\_\_\_ ROOFING \_\_\_\_\_ SIDING \_\_\_\_\_

**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 stated above. Any deviation from information contained herein unless Approved by the Building Official will render this permit null and void.

\_\_\_\_\_  
 SIGNATURE OF CONTRACTOR, OWNER OR AGENT

\_\_\_\_\_  
 DATE