

Commercial Building Permit Application

City of Garfield
 14655 S. Wimpy Jones Road
 Garfield, AR 72732
 479-359-3652



Application Instructions – Please fill this form out completely and submit all required information.

Submittal Requirements: *Set of plans *Septic approval from state

PROJECT INFORMATION:

PERMIT NUMBER: _____

Property Address: _____

Project/Tenant Name: _____

BUILDING INFORMATION:

Total Sqft: _____ Occupancy Type: _____ No. of Units: _____

Type of Construction: _____

Valuation of Work: \$ _____ Planning Approval: _____

OWNER INFORMATION:

Owner Name: _____ Phone Number: _____

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

CONTRACTOR INFORMATION:

Contractor: _____ License Number: _____

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

Email Address: _____ Phone Number: _____

CLASS OF WORK:

New Home Addition Remodel Apartments Other

DESCRIPTION OF WORK:

A separate permit is required for plumbing. 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 provisions of laws 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 provisions of any other state or local law regulating construction or the performance of construction. I also agree that the building or premises shall not be occupied until a Certificate of Occupancy is issued.

 Signature of Owner, Contractor Date

OFFICE USE ONLY

Check _____	Cash	
Permit	Penalty	Total

COMPLETION OF CONSTRUCTION

It is the homeowner's responsibility to contact the City upon completion of construction in order to receive a Certificate of Occupancy. You may be required to present the final inspection any for electrical and gas.

Building Address: _____

Legal Description:

Lot: _____ Block: _____ Subdivision: _____

Zoning: _____

Building Information:

Type of Structure: _____

Is Structure in accordance with Arkansas Fire Prevention Code and City Ordinance _____ Yes _____ No

Completion Date: _____

I certify that the above to be true and correct and a Certificate of Occupancy can be given.

Zoning Official

Date