



City of Johnson Building Permit Application

PO Box 563 · 2904 Main Drive
Johnson, Arkansas 72741
Phone: (479) 521-7291
FAX: (479) 521-7292

Permit Number: _____

NOTE 1: ALL APPLICATIONS MUST BE COMPLETELY FILLED OUT IN BLUE OR BLACK INK.
NOTE 2: A COPY OF THE DRIVERS LICENSE WILL BE TAKEN OF THE PERSON WHO SUBMITS THE APPLICATION TO THE CITY (THIS INFORMATION IS NEVER INCLUDED IN FOIA REQUEST).

Address of Job: _____

Lot #: _____ Block #: _____ Subdivision: _____

Owners Name: _____

Owners Address: _____

Contractors Name: _____

Contractors Address: _____

Contractors Phone(s): _____

Contractors License #: _____ Expires: _____

Number of Stories: _____ Number of Units: _____ Number of Acres: _____

Circle One: NEW ADDITION ALTERATION REPAIR

Circle One: SINGLE FAMILY MULTI FAMILY CONDOS COMMERCIAL

Structure Depth: _____ Structure Width: _____

Heated Square Feet: _____ Unheated Square Feet: _____

Total Square Feet: _____ Total Value of Project: _____

Front Setback: _____ Rear Setback: _____ Side Setback Left: _____ Side Setback Right: _____

Type of Construction: _____ Type of Occupancy: _____

Zoning: _____ Sprinklered: _____ Fire Alarm: _____

Plumber: _____ Electrician: _____ Heat & Air: _____

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 STARTED.

ALL INSPECTIONS REQUIRE A MINIMUM 24 HOUR NOTICE. ALL INSPECTION ARE DONE MONDAY THROUGH FRIDAY AND CAN BE SET FOR AM OR PM ONLY.

FOUR COMPLETE SETS OF CONSTRUCTION DOCUMENTS ARE REQUIRED AT TIME OF SUBMITTAL OF PERMIT

APPLICANT: I, THE UNDERSIGNED APPLICANT, DO HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT; AND THAT I HAVE THE AUTHORITY TO MAKE THIS APPLICATION. ALL PROVISIONS OF 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 FEDERAL, STATE OR LOCAL LAW.

Signature: _____ Date: _____

Approved By: _____ Approval Date: _____