

**CITY OF LONOKE**  
**COMMERCIAL BUILDING PERMIT APPLICATION**

Name of Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address or Legal Description: \_\_\_\_\_

Type of Building: \_\_\_\_\_ Contractor's License #: \_\_\_\_\_

ZONED:      ☐ QB (C-3)      ☐ CBD (C-1)      ☐ GC (C-2)      ☐ Ind (I-1)

TYPE OF BUSINESS: \_\_\_\_\_

IS THERE A BILL OF ASSURANCE FOR THIS AREA?    ☐ YES      ☐ NO

IS THIS PROPERTY LOCATED IN A DESIGNATED FLOOD WAY?    ☐ YES      ☐ NO

Foundation:      ☐ Concrete    ☐ Brick    ☐ Stone    ☐ Blocks    ☐ Other: \_\_\_\_\_

Outside Walls:    ☐ Wood    ☐ Brick    ☐ Stone    ☐ Blocks    ☐ Metal    ☐ Other: \_\_\_\_\_

Inside Walls:      ☐ Wood    ☐ Sheetrock    ☐ Plaster    ☐ Other: \_\_\_\_\_

Floor:              ☐ Hardwood    ☐ Concrete    ☐ Tile    ☐ Other: \_\_\_\_\_

Roof:                ☐ Wood Shingle    ☐ Asphalt Shingle    ☐ Tile    ☐ Composition    ☐ Other

Building Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Total Floor Area: \_\_\_\_\_ Square Feet

Number of Water Connections Needed \_\_\_\_\_ Number of Sewer Connections Needed \_\_\_\_\_

Meter size Required \_\_\_\_\_ Sprinkler Meter Required \_\_\_\_\_ When \_\_\_\_\_

**YOUR ESTIMATED TOTAL COST OF ENTIRE PROJECT: \$ \_\_\_\_\_**

**By my signature below, I agree to abide by City of Lonoke Ordinance #434, adopted 7-6-98, Standard Building Codes. No work shall be covered until inspected by the appropriate person(s). Failure to comply will result in the builder removing all necessary materials for inspection.**

**DATE:** \_\_\_\_\_ **Signature of Applicant:** \_\_\_\_\_

**PERMIT # \_\_\_\_\_**

# CITY OF LONOKE

## COMMERCIAL BUILDING PERMIT APPLICATION

***A survey and site plan showing structure placement, complete set of stamped and sealed drawings w/Health Dept Review letter (for plumbing) and State Fire Marshall Review letter must be attached to this application showing the following: (No permit will be issued without these items.)***

1. All street names bordering the property.
2. Lot size.
3. Any open alleys bordering the property.
4. Any utility easements.
5. Water meters and water and sewer lines to the structure.
6. Any other buildings or structures on the lot.
7. Distances—
  - a. Front of building to edge of property line.
  - b. Side of building to edge of property line.
  - c. Back of building to property line.

### **Keep in mind...**

1. **ALL** structures must be within the following limits:
  - a. Front of structure must be 25 feet from property line (C-2, C-3, I-1 if adjacent to Residential District.)
  - b. Front of structure must be 50 feet from property line (I-1)
  - c. Side of structure must be 25 feet from property line if **corner** lot (C-2, C-3, I-1)
  - d. Side of structure must be 10 feet from property line if interior lot (C-2, C-3)
  - e. Side of structure must be 20 feet from property line (I-1)
  - f. Side of structure must be 35 feet from property line if adjacent to Residential District. (C-2, C-3, I-1)
  - g. Rear of structure must be 15 feet from rear property line. (C-2, C-3, I-1)
  - h. Rear of structure must be 35 feet from rear property line if adjacent to Residential District. (C-1, C-2, C-3, I-1)
2. Six (6) foot visual screening is required where commercial property adjoins a Residential District. (C-2, C-3, I-1)
3. No structure may be erected over utilities.
4. **Structures must be built a minimum of 3 blocks high (24") or at least 6" above street grade unless in flood plain and then an elevation certificate will be required.**

## **APPLICATION APPROVAL**

_____	_____
_____	_____
_____	_____
_____	_____

**BUILDING INSPECTOR**

**PERMIT # \_\_\_\_\_**

**CITY OF LONOKE**  
**COMMERCIAL BUILDING PERMIT APPLICATION**  
**FEES**

	<b><u>AMOUNT</u></b>	<b><u>RECEIPT #</u></b>	<b><u>DATE</u></b>	<b><u>CLERK</u></b>
Building Permit Fee Collected				
State Sur Charge Collected				
Water Connection Fees				
Sewer Connection Fees				
Plumbing Inspection Fees				
Electrical Inspection Fees				
HVAC Inspection Fees				

**CONTRACTORS INFORMATION**

**PLUMBING:**

COMPANY NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

PLUMBERS NAME: \_\_\_\_\_ M. LICENSE #: \_\_\_\_\_

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

**ELECTRICAL:**

COMPANY NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ELECTRICIANS NAME: \_\_\_\_\_ M. LICENSE #: \_\_\_\_\_

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

**HVAC:**    **Manual J Submitted**    Yes \_\_\_\_\_    No \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

INSTALLERS NAME: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

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

**NOTE:**        **All work must be completed by licensed contractors** and in accordance with all applicable Federal, State and Local laws and ordinances. Failure to comply with these regulations may result in fines and/or removal of all building materials necessary to complete the proper inspections.

**PERMIT # \_\_\_\_\_**