

CITY OF MAUMELLE

BUILDING PERMIT APPLICATION

This permit does not effect any applicable Bills of Assurances or Restrictive Covenants on property, or the Owner's Requirements to comply therewith.

S.F.U.R.
BUILDING FEE \$
ELECTRICAL FEE \$
MECHANICAL FEE \$
PLUMBING FEE \$
TOTAL PERMIT FEE \$
FOR OFFICE USE ONLY

Water Meter Obtained
Date Initial

LOT & ADDITION:
STREET ADDRESS:
OWNER'S NAME TELEPHONE
BUILDER'S NAME OFFICE PHONE
ADDRESS CELL PHONE
DRIVER'S LICENSE # DATE OF BIRTH

RESIDENTIAL OR COMMERCIAL CONTRACTORS LICENSE NUMBER
Expiration Date

ELECTRICAL SUBCONTRACTOR
MECHANICAL SUBCONTRACTOR
PLUMBING SUBCONTRACTOR

LOT VALUE \$ BLDG. VALUE \$ TOTAL VALUE \$
OF STORIES BEDROOMS BATHS
FOUNDATION TYPE: Slab Pier & Beam Other
SQ. FT.HEATED/COOLED PARCEL SIZE

I hereby acknowledge that I have read this application and state that the above information is true and correct. I hereby agree to build according to the plans and specifications that I have submitted for the above work and to comply with all City Ordinances, Codes, and State or National Laws governing building construction.

APPROVED BY
DATE SIGNATURE OF BUILDER DATE



City of Maumelle

DEPARTMENT OF CODE ENFORCEMENT / PERMITS

BILL OF ASSURANCE COMPLIANCE FORM

Subdivision Name: _____ Lot No.: _____

1) Minimum square feet heated/cooled
Required: _____

Proposed: _____

2) Minimum percent of masonry
Required: _____

Proposed: _____

3) Minimum set-backs
Required Front: _____
Required Rear: _____
Required Side: _____

Proposed Front: _____

Proposed Rear: _____

Proposed Side: _____

4) Foundation Requirements _____ Yes _____ No
If yes, no exposed concrete block foundations.

Proposed foundation treatment: _____

5) Minimum garage
Required: _____

Proposed: _____

I do hereby certify that the above noted proposed calculations are true and correct and I will uphold these in the construction of this home.

Name of Contractor

Signature of Representative



REQUEST FOR TEMPORARY TO PERMANENT POWER

We, the undersigned parties, are requesting that temporary permanent power be turned on at the address stated with the stipulations listed below:

- 1) This will be for a period not to exceed thirty (30) days.
- 2) The Maumelle Department of Code Enforcement/Permits will be contacted immediately upon completion of the job to make a final inspection prior to any occupancy of the building.
- 3) The structure will not be occupied until after the final inspection has been made and Certificate of Occupancy has been issued.
- 4) We agree to assume all liability for any damage incurred as a result of the power being disconnected from this building because of violation of this ordinance.

We also acknowledge by signing this document that we are aware of the following penalties for failure to comply with the above stated requirements.

Occupying a structure before final inspection:

Any such violation shall be punishable by a fine of not less than Fifty Dollars (\$50.00) nor more than Five Hundred Dollars (\$500.00) for each specified offense or violation, and of not less than One Hundred Dollars (\$100.00) nor more than Two Hundred Dollars (\$200.00) for each repetition of such offense or violation. Any person who shall violate this provision of the code, which violation shall be in its nature continuous in respect to time, shall be punished by a fine of not less than Twenty-Five Dollars (\$25.00) nor more than Two Hundred Dollars (\$200.00) for each day during any part of which the violation shall have occurred. (Ch4Sec4-6MCC).

Lot & Subdivision: _____

Street Address: _____

Builder/General Contractor:

Property Owner:

Print Name

Print Name

Authorized Signature

Signature(s)

Date

Date



City of Maumelle

**CITY MAINTAINED PROPERTY
EXISTING DAMAGE REPORT**

The following damage has been noticed on my jobsite prior to any work being preformed by my crews:

Reported on ____ **day of** _____, _____.

Work to commence on the ____ **day of** _____, _____.

Jobsite:

Lot _____, _____ **Addition**

Street Address: _____

Print Name of Contractor

Signature of Contractor