



Permitting
 Planning and Development
 220 North Knoxville Avenue
 Russellville, AR 72801
 (479) 968-1002 ext.1

Inspection Services
 Fire, Building & Safety Division
 107 North El Paso Avenue
 Russellville, AR 72801
 (479) 968-1002 ext.2

RESIDENTIAL BUILDING PERMIT APPLICATION

Email: permitting@rsvlar.org

| Section 1. Project Information | Permit Number |
|---|---------------|
| <input type="checkbox"/> Single-family <input type="checkbox"/> Duplex <input type="checkbox"/> Townhome <input type="checkbox"/> Accessory <input type="checkbox"/> Other: _____ | |
| 911 / Property Address: _____ | |
| Subdivision: _____ Block: _____ Lot: _____ Parcel #: _____ | |
| More than one dwelling on parcel? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, then submit Civil Site Plan and Report. | |
| FOR BUILDINGS AND STRUCTURES LOCATED IN WHOLE OR IN PART IN FLOOD HAZARD AREAS, APPLICANT MUST COMPLETE THE FLOODPLAIN DEVELOPMENT PERMIT APPLICATION . PLEASE PROVIDE A LEGAL DESCRIPTION, STREET ADDRESS, OR SIMILAR DESCRIPTION THAT WILL READILY IDENTIFY THE PROPOSED BUILDING OR WORK, ALONG WITH A SURVEY OF THE PROPERTY ATTACHED TO THE APPLICATION, WITH PROPOSED STRUCTURES AND SETBACKS. FOR TOWNHOMES, PLEASE PROVIDE FIRE SEPARATION WALL DETAIL IN ACCORDANCE TO ASTM E 119 OR UL 263. RESIDENTIAL DWELLINGS EXCEEDING QUADRUPLEX SHALL REQUIRE ARCHITECTURAL PLANS SEALED BY AN ARCHITECT IN THE STATE OF ARKANSAS. | |
| Section 2. Project Description | |
| <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Other: _____ | |
| Proposed Use: _____ Heated SF: _____ Garage SF: _____ Basement SF: _____ | |
| # of Bedrooms: _____ # of Bathrooms: _____ # of Stories: _____ Retaining Wall Ht: _____ | |
| Total SF: _____ Estimated Value of Project: \$ _____ | |
| Description of Work: | |
| Section 3. Contact Information | |
| Property Owner: _____ | |
| Mailing Address: _____ City: _____ State: _____ Zip: _____ | |
| Phone: _____ Email: _____ | |
| General Contractor: _____ License #: _____ | |
| Mailing Address: _____ City: _____ State: _____ Zip: _____ | |
| Phone: _____ Email: _____ | |

Section 4. Acknowledgement and Signature

Applicant is: Property Owner General Contractor Architect / Engineer Other: _____

THIS PROJECT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

DEVELOPMENT SHALL NOT BE USED OR OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED BY THE BUILDING OFFICIAL.

SEPARATE PERMITS ARE REQUIRED FOR PLUMBING, ELECTRICAL AND MECHANICAL.

HEALTH DEPARTMENT APPROVALS (IF APPLICABLE) SHALL BE ATTACHED TO THIS APPLICATION.

APPLICATION SHALL BE ACCOMPANIED BY CONSTRUCTION DOCUMENTS AS REQUIRED BY THE RESIDENTIAL CODE.

IF APPLICANT IS ACTING AS PROPERTY OWNER'S AGENT, [APPOINTMENT OF AGENT FORM](#) SHALL BE SUBMITTED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND I 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. I AUTHORIZE REPRESENTATIVES FROM THE CITY OF RUSSELLVILLE TO ENTER THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

Name of Applicant (Print)

Signature of Applicant

Date