CITY OF ELM S 289 JAYROE AVEN P.O. BOX 74 ELM SPRINGS, AR (479) 248-7323 Fax www.elmsprings.net **NOTE: Must Sub and current insura	UE 72728 : (479) 248-1092		RESIDENTIAL PERMIT APPLICATION	
PROPERTY INFORMATION				
Project Address		City	Zip	
Subdivision	Lot	# County	🗌 Washington 🗌 Benton	
Property Owner		Primary P	hone ()	
Address	Suite	Secondar	y Phone ()	
City	State Z	ip Email		
Applicant			hone ()	
Address	Suite	Secondar	Secondary Phone ()	
City	State Z	ip Fax # (	)	
Project Contact Person		Email		
SCOPE OF WORK & BUILDING INFORMATION				
FOR NEW DWELLINGS: Check This Box and Complete Page 4 Total Construction Cost \$				
D <mark>escription of Work:</mark>				
	·			
Total Area (SF) of the new work:				
Permit Type: Single Family Dwelling Townhouse Duplex (a separate permit is required for each unit)				
Addition to Bldg.	Mobile Home Movi		ucture (complete page 3 of the application)	
UTILITY INFORMATION				
Water Dublic Drivate (well)				
Sewer Dublic Drivate (septic)*				
PROPERTY OWNER'S STATEMENT				
PROPERTY OWNER'S STATEMENT   I hereby certify that I have the authority to make the state Building Code and all other applicable S imposed by deed. The Building Official will be not implementation. Fees will be calculated by staff b   CHECK ONE OF THE FOLLOWING BOXES:   This permit application is for new work	tate and local laws and ordinanc ified of any changes in the appro ased on applicant information pro This permit application is to leg- understand that this work mus	es and regulations or priv ved plans and specification prided at the time of build alize work performed with t conform to the current or	ate building restrictions, if any, which may be	
	inspected by the code enforce	ment official.		
Property Owner/Agent (print)	Sigr	ature	Date	