



CITY OF BATESVILLE

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Denise Johnston, Clerk
Scott Stalker, Attorney

COMMERCIAL BUILDING PERMIT APPLICATION

Project Owner, _____

Address, City, State, Zip _____

Phone Numbers H# (____)-_____ W# (____)-_____ C# (____)-_____

Project Type: Remodel Pool Other

Addition Storage

New Construction

Project Location or Address _____

Zoning Code _____

Block # _____

Lot # _____

Contractors Information: (Include Name, Address, Phone and License Number.)

General: _____

Electrical: _____

HVAC: _____

Plumbing: _____

Total Estimated Cost of Project: _____

*** It is the applicants' responsibility to meet all local, state and federal guidelines.**

Application must be returned with a complete set of drawings:

Ark. Dept. of Health approval of Plumbing Plans? YES_____ NO_____

Drawings must have the Architect's and Engineer's Certification Stamp and Signature

Application must be returned with a SITE PLAN attached. Site Plan must include floor plan, square footage, utilities, parking and building set back lines.

Depending on the job type, there will be inspections required; as well as green tags needed for Entergy to turn on electric and CenterPoint to turn on gas.

Signature _____

Date _____

DEPARTMENT USE ONLY

Date Received _____

Date Entered _____

Entered By _____

Permit # _____