

**CITY OF MOUNTAIN VIEW
BUILDING DEPARTMENT
P.O. BOX 360
MOUNTAIN VIEW, AR 72560
PHONE: 870-269-3686 - FAX: 870-269-3778
EMAIL: pandz@ozarkisp.net**

***** PLEASE PRINT LEGIBLY*****

Applicant: _____ Day Phone #: _____

Address: _____

Owner: _____ Day Phone #: _____

Address: _____

Builder: _____ Day Phone #: _____

Address: _____

Address of New Construction: _____

Structure Use (House, Storage Building, Etc.): _____

Estimated Cost of Construction (Including Concrete): _____

FLOOR AREAS (IN SQUARE FEET)

Living Space or Commercial Heated Space: _____

Garage: _____ Heated or Unheated: _____

Decks: _____

Basement/Storage: _____ Heated or Unheated: _____

Porches: _____

Other (Please Specify): _____

Total Area: _____

IMPERVIOUS (CONCRETE) SURFACES (IN SQUARE FEET)

House or Commercial Building: _____ Garage: _____

Driveways: _____ Porch/Walk: _____

Other (Please Specify): _____

Total Impervious Surfaces: _____

TOTALS

Square Feet Heated Area: _____ Square Feet Unheated Area: _____

Total Square Feet: _____

Type of Heating: Propane Gas Natural Gas Wood Electric None

Ventilation: Forced Air Gravity Windows Only Other _____
 Fireplace: Yes No
 Water Heater: Propane Gas Natural Gas Electric None
 Size of Water Heater in Gallons: _____
 Water Supply: Municipal Well None
 Sewer Connection: Municipal Septic System Other None
 Will you need a temporary construction power: Yes No
 Electric service capacity: 100 150 200 Other _____ None

DESCRIBE USE OF BUILDING AND MATERIALS TO BE USED IN CONSTRUCTION
 (One Story Dwelling - Wood Frame with Brick and Attached Garage):

You must submit a plot plan showing location of building or buildings to property lines, dimension all setbacks, show access roads, streets or highways. If local water and sewage, show location and distance between septic system and water supply.

When private water supply and/or sewage disposal system is utilized, a valid approved County Health Department permit shall be required as a prerequisite for approval of the certificate of occupancy.

Fill in all applicable portions of general construction permit application above. Submit 2 copies of drawings and specifications if project entails such.

APPLICANT AGREEMENT:

At the time of signing this building application and receiving a building permit, I agree to abide by all building codes, zoning ordinances, and other ordinances adopted by the City of Mountain View pertaining to the above described building. I understand that non-compliance with the rules may result in the revocation of my building permit.

 SIGNATURE OF APPLICANT DATE APPLICANT 2 DATE

NOTICE: A Building Permit does not include plumbing, electric, and heating and air permits. There is a separate charge for each of these permits.

Initial Here: _____

DO NOT WRITE BELOW THIS LINE - TO BE COMPLETED BY CITY OFFICIAL

PERMIT APPROVED AND ISSUED BY: _____

DATE ISSUED: _____ PERMIT COST: _____ PERMIT #: _____

REMARKS: _____

 SIGNATURE OF OFFICAL: _____