## **Building Department**



## **Mechanical Permit Application:**

Permit #: \_\_\_\_\_

Fee: \$ \_\_\_\_\_ \*Replacement stickers may be issued for a fee. Stickers must be placed on the Inspection Box prior Receipt#: to inspection being scheduled. \* Approved By: \*\*NOTE: Must Submit Copy of Master License Date approved: with Application\*\* Sticker issued: **Site Information: Site Address:** Subdivision: Lot # (if known): **General Contractor OR Site / Property Owners Information:** Name: Phone #: Mailing Address: Email: **Sub/Contractor's Information: Business Name:** Phone #: Mailing Address: Email: Contact Person: Phone #: Master Lic#: Exp Date: **General Information:** Type of Work: ☐ New Constr. ☐ Addition □ Remodel ☐ Other (list): ☐ Commercial □ Residential Description of Work: Value of Commercial (Materials & Labor): This permit is issued with a hold harmless agreement with the City of Tontitown for any damage from Arkansas State Law Title 14-SubTitle16-Chapter271. "Arkansas Underground Facilities Damage Prevention Act." Also known as 811 - Arkansas One Call. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. I hereby certify that I have read and examined this application and 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. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Permit fees will double if work begins before permit is approved and/or if lines are covered before inspection has passed. Requests for inspections may be made either by emailing <a href="maintenance@tontitownar.gov">maintenance@tontitownar.gov</a> or calling 479-263-9215. Signature of Owner or Contractor: Date: