BENTON COUNTY BUILDING SAFETY

215 E CENTRAL
BENTONVILLE, AR 72712

Office: 479-271-1003
Text: 475-522-1003
Email: permits@bentoncountyar.gov

BEFORE APPLYING FOR YOUR NEW HOME PERMIT
Check with 911 Administration for address: 479-271-1085
Check with Road Department for driveway: 479-271-1052
Check with Health Department for Septic: 479-986-1300

Checklist:
☐ Application ☐ Septic Approval ☐ Contractor License
☐ Site Plan (must show property lines, distance from structure to each property line and to the center of the road)
☐ Building Plans (need room designations, room, door and window sizes. Over 2000sf must be computer generated.)
* Documents larger than 11x17must be digital and legible.
**Certain projects may require documentation of a functioning septic

Parcel # _____ ☐ Flood ☐ MS4

Description of work: _____ PRIMARY CONTACT: ☐ Owner ☐ Contractor

PROPERTY OWNER INFORMATION

Property Owner Name: _____

Project Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Property owners mailing address: _____

I the undersigned will be responsible for performing the work and meeting the requirements of all codes, ordinances, and laws; and that I am the owner of the above-described property.

_____ Property Owner Signature _____ Date

BUILDING INFORMATION

☐ New Home ☐ Addition ☐ Garage/Shop
☐ Barndominium/Shouse ☐ Remodel (must submit plans and scope of work being done).

Heated SF: _____ Garage SF: _____
Unfinished Basement SF: _____ Total SF: _____
Bedrooms: _____ # Bathrooms: _____ # Stories: _____

**Exterior of building to remain uncovered until framing inspection. Extra $50 inspection fee for exterior house wrap inspection.*

EXTERIOR FRAMING TYPE:

☐ Wood (poles, 2x4 or 2x6) CIRCLE ONE
☐ Metal (pre-engineered)
☐ Concrete (ICF)
☐ Spray Foam Insulation
(Must submit ICC ESR Report before framing inspection)

FOUNDATION TYPE: CIRCLE ONE (slab, crawl, basement)

☐ Stem Wall- slab, crawl, basement
☐ Block (CMU)- slab, crawl, basement
☐ Monolithic slab
☐ Piers
☐ Post frame

UTILITY INFORMATION

☐ Sewer ☐ Septic MUST PROVIDE PROOF OF A PRIVATE COLLECTION/DISPOSAL SEPTIC SYSTEM FOR: New or Remodeled Dwellings, Garage/Shops with bathroom, H/C or Bathroom Additions, Mobile Homes, Accessory Buildings with bathrooms.

Elec. Provider: _____ Water Provider _____

CONTRACTOR INFORMATION

General Contractors Name: _____ Primary Contact: _____

Phone: _____ Email: _____ Lic. # _____

Trade Contractors Name: _____ Primary Contact: _____

Phone: _____ Email: _____ Lic. # _____

A copy of all licenses must be provided with each new project.

CLASS OF WORK

☐ **Plumbing $50** ☐ **Gas $50** ☐ **Electric $50** ☐ **HVAC Mechanical $50** (J & D submitted if new duct work)
☐ **Storm Shelter $50** ☐ **Pool $100** ☐ **Deck $100** ☐ **Carport $50/$100** (w/slab)
☐ **Mfg./Mobile Home $100** ☐ **Solar $100** ☐ **Demo $50** ☐ **Other** _____
☐ **Accessory Building $100** ☐ **Accessory Building with Living H/C sf:** _____ **$250**

Note: 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 provision of the Law 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 previsions of any other State or Local Law regulating construction or the performance of construction. Permit fees are non-refundable.

_____ Owner/Contractor Signature _____ Date