

Commercial Building Permit

City of Rogers
Risk Reduction
113 N 4th St
Rogers, AR 72756
(479)-621-1100



Application Instructions - Please fill this form out completely and submit all required information.
**Information is required to figure your permit cost for New Construction/Additions.*

PROJECT INFORMATION

PERMIT NUMBER: _____

Property Address: _____ Suite/Unit Number: _____

Project/Tenant Name: _____

PRE-PERMITTING QUESTIONS

Do you have Large Scale/Small Scale Development Approval? *Yes No NA ***Provide copy of approval letter**

Do you have a Grading Permit? *Yes No NA ***Provide copy of grading permit**

Have you had your Pre-Construction meeting with the Risk Reduction Division? *Yes No NA ***Date of Meeting:** _____

BUILDING INFORMATION

Class of Work: New Addition Remodel/In-fill Apartments Pool

*Total Sqft: _____ *Occupancy Type: _____ Number of Units: _____

*Construction Type: IA IB IIA IIB IIIA IIIB IV VA VB

Valuation of Work: \$ _____ (Figured from ICC Valuation Table)

DESCRIPTION OF WORK: _____

OWNER INFORMATION

Owner Name: _____ Phone Number: _____

Address: _____ City/State: _____

CONTRACTOR INFORMATION

Company Name: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone Number: _____

Separate permits are required for plumbing, electrical and mechanical. 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.

Signature of Owner, Contractor

Date

OFFICE USE ONLY: Cash Credit Card Check Check # _____ Total Due: \$ _____