

Bella Vista Architectural Control Committee

Application for Permit Extension

www.bvacc.com

Staff Only: Initials _____

Paid: _____ Date _____

Permit # _____ ACC# _____

PERMIT DETAILS

Address _____

Lot(s) _____ Block _____ Subdivision _____ Parcel _____

Any changes to the approved color scheme or building materials? NO YES (SEE BELOW)

Color Scheme requested -- provide manufacturer name and color name of products:

Roof: _____ Gutters/Downspouts: _____

Siding: _____ Garage Door: _____

Stone/Brick: _____ Windows/Shutters: _____

Trim/Soffit/Fascia: _____ Other: _____

A new color scheme page or sample may be required.

OWNER INFORMATION

Owner(s) Name: _____

Mailing Address: _____ City _____ State _____ Zip _____

Primary Phone: _____ Email: _____

PRIMARY CONTACT INFORMATION

** OWNER IS STILL SOLEY RESPONSIBLE FOR THEIR PROPERTY, EVEN WHEN A REPRESENTATIVE IS ACTING ON THEIR BEHALF.*

Business Name: _____

Primary Contact: _____

Mailing Address: _____

Phone: _____ Email: _____

EXTENSION INFORMATION

**Extensions are valid for 90 days.
You must display the new permit onsite.**

FEE: \$ 25.00 Miscellaneous Repair or Improvement
\$50.00 Residential or Commercial
(Maximum 2 extensions)

NO REFUNDS

THERE IS NO FEE REQUIRED FOR CHANGING MATERIALS, LOCATION OR COLORS ON AN EXHISTING PERMIT

Application Checklist

All applications are reviewed on a case-by-case basis and additional documents may be required.

- Fill out, sign, and date the application.

- Has the plot plan changed for this project? NO YES (SEE BELOW)
If yes, please provide one copy (11" x 17") of the survey/plat, drawn to scale and which meets the requirements set in the ACC survey/plat checklist. **All required information must be on one copy of the survey/plat.**

- If on Septic - Has the AR Dept of Health Septic Approval expired? NO YES (SEE BELOW)
If yes, provide letter or updated approval from AR Dept of Health.

- Have the building materials changed for this project? NO YES (SEE BELOW)
If yes, please provide, one set of updated house plans (11" x 17") to include: four exterior elevations (front, rear, and sides) that shows where all requested exterior materials will be used/located, floor plan, and roof plan (top view).

- Has the color preference changed for this project? NO YES (SEE BELOW)
Please provide a Color Scheme Sheet to include: manufacturer name, and color name and picture of color to be used for all exterior materials. *Actual samples may be required if colors are not easily identified.*

- One copy of the Builder's Risk insurance policy from the property owner equal to the value of the project that includes: legal description, address of property, and dates of coverage.

- Updated proof of financial ability from the property owner in the form of an **original signed** letter from the financial institution with reference to the property by legal address stating the loan is still in good standing.

- One copy of Worker's Comp Insurance (as applicable).

I certify that the above, together with attached survey/plat, construction plans, materials and color descriptions, constitutes a true description of the proposed building and accessory construction and that the location on the site of all items of construction will be in accordance with these documents. I further certify that I have read and understand the Acknowledgements described and adhere to the rules and guidelines specified.

Property Owner or Designated Representative's Signature

Date

ACC Administrator's Signature

Date of Approval

STAFF NOTE: This application and construction is approved, subject to the following changes or additions:
