

Planning & Environmental Services Department
905 NW 8th Street
Bentonville, AR 72712
(479) 271-1003
<http://www.co.benton.ar.us/CountyPlanning/Default.aspx>

Planning Staff
Christopher J. Ryan, AICP; Director
Rinkey Singh, AICP, Planning Manager
Mary McGetrick, Planning Coord.

BENTON COUNTY
PLANNING &
ENVIRONMENTAL SERVICES

Project Number

Date Stamp

SITE PLAN REVIEW APPLICATION (Form P5)

Site Plan Review for Large Scale Development (LSD) is applicable for all non-residential, non-agricultural development including new development, redevelopment, building additions, the establishment of new enterprise in previously residential or agricultural building and/or lot, and a significant change in use.

Applications must be submitted in person. Please make an appointment with a staff planner so that you can discuss your project and they can determine if you have submitted a complete application. PLEASE NOTE: INCOMPLETE APPLICATIONS CANNOT BE ACCEPTED.

Project Type: New Submittal Resubmittal Amended Site Plan

Checklist Summary (see end of application for a complete checklist)

- Completed application with original signatures
- Eight (8) sets of folded site plans
- Eight (8) sets of color photographs
- Application Fee (cash, check, money order)
- CD, DVD, or memory stick with all of the application files in electronic format (PDF)

*5
Mar 8/13*
*8
Mar 8/13*

Basic Information

Project Title:

Project Description
(please use cover letter for large projects):

Assessor's Parcel Number(s):

Street Address:

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT AND
HOMELAND SECURITY

215 E. CENTRAL AVE. #7, BENTONVILLE, AR 72712

Phone 479-271-1004

FAX 479-271-1084

HAZARDOUS CHEMICAL COMPLIANCE FORM

BUSINESS NAME: TowMate LLC TYPE OF BUSINESS: Commercial

OWNER'S NAME: Bryan Anderson

PHYSICAL LOCATION/ADDRESS: 15704 E. Hwy 12 Rogers, AR 72756

MAILING ADDRESS FOR LETTER: 15827 Serenity Point Ln, Rogers, AR 72756

CONTACT PHONE NUMBER: 479.925.3370

CONSULTANT/ENGINEER: GARY DAVIS

A LETTER WILL BE SENT TO THE BUSINESS OWNER AND THE PLANNING OFFICE.

IF THERE ARE OTHER LOCATIONS PLEASE SPECIFY: _____

WILL THERE BE CHEMICALS STORED AT THIS FACILITY? YES ___ NO

IF YES - LIST NAME AND QUANTITIES BELOW:

BY SIGNING BELOW, I ACKNOWLEDGE THAT ALL INFORMATION ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT IF THIS INFORMATION CHANGES.

[Signature]
OWNER SIGNATURE

3/8/13
DATE

BENTON COUNTY DEPARTMENT OF EMERGENCY MANAGEMENT ONLY

LETTER COMPLETED BY _____
DEM OFFICE DATE

LOCATED ON Y DRIVE - TEMPLATES

Location (Municipality or Area):

ROGERS, AR

Project Information

Project Land Area (acres/sq. ft.)

3.9 ACRES

Land Use:

Existing:

VACANT

Proposed:

COMMERCIAL

Building Size(s) in Sq. Ft.: 11,124

Existing

Structure(s):

NONE

Proposed New Structures:

11,124

Is the lot in a Floodplain?

Yes No

<p>Builder/Developer: _____</p> <p>Phone: _____ Fax: _____</p> <p>Email: _____</p> <p>Mailing Address: _____</p> <p>City: _____ Zip: _____</p> <p><input type="checkbox"/> Send Certificate of Occupancy to this address</p>	<p><i>MORRIS DALE KING (OFFER TO PURCHASE)</i> (owner) Property Owner: <u>BRYAN ANDERSON</u></p> <p>Phone: 479-925-2131 Fax: _____</p> <p>Email: _____</p> <p>Mailing Address: <u>15827 SERENITY POINT LN</u></p> <p>City: <u>ROGERS, AR</u> Zip: <u>72757</u></p> <p><input checked="" type="checkbox"/> Send Certificate of Occupancy to this address</p>
<p>Engineer/Surveyor: <u>GARY A. DAVIS, P.E.</u></p> <p>Phone: <u>479-366-4268</u> Fax: _____</p> <p>Email: <u>gary@gdavisengineering.com</u></p> <p>Mailing Address: <u>6487 W. WEDINGTON DR</u></p> <p>City: <u>FAYETTEVILLE, AR</u> Zip: <u>72704</u></p>	<p>Architect: <u>H. COLLINS HAYNES</u></p> <p>Phone: <u>479.640.8411</u> Fax: _____</p> <p>Email: _____</p> <p>Mailing Address: <u>5900 STONEY BROOKE RD SUITE 3205</u></p> <p>City: <u>ROGERS, AR</u> Zip: <u>72758</u></p>

Applicant's Signature: *M.D.K.* Date: 3/8/13

Owner Certification

I certify under penalty of the laws of the State of Arkansas that I am the property owner of the property that is the subject matter of this application and I am authorizing to and hereby do consent to the filing of this application and acknowledge that the final approval by Benton County, if any, may result in restrictions, limitations and construction obligations being imposed on this real property.

Owner/Authorized Agent Signature: *Morris Dale King* Date: 3-8-13

Print Name: MORRIS DALE KING

An authorized agent for the owner must attach a notarized letter of authorization from the legal property owner. Written authorization from the legal property owner is required at the time of application or the documents will not be accepted.

Design Professional Information (as applicable)

Company:

Contact Name:
LAST FIRST MI

License Type and Number:

Telephone: Fax No:

Alt. Tel: Cell No.:

Address:
STREET CITY STATE ZIP

E-Mail 1: E-Mail 2:

OFFICE USE ONLY

Application Fee: \$ 300.00 Check Number: _____

Accepted as Complete by: _____ Date: _____

Date of 1st Planning Board Meeting: _____ Date of Public Hearing: _____

Approved by Planning Board: Yes No Date: _____ Reviewed by: _____ Date: _____