

Downtown Architectural District
Application for a Certificate of Approval from the District Review Board

Date Application Submitted: _____

Property Address: _____

Property Owner

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Person Making Application if Different from Property Owner

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Project Architect, Contractor, Engineer, or Company Vendor

Contact/Company Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Please give a written summary of your proposed work. Attach any documents if needed.

Estimated Date for Construction to begin: _____

Has the applicant contacted the Paragould City Inspector's Office? YES / NO

Has the applicant contacted Paragould Fire Department about current fire codes for the project? YES / NO

Please email this application and attachments to: info@downtownparagould.com



main street
DOWNTOWN PARAGOULD