



City of Senatobia

MISSISSIPPI

131 N. Front St. Senatobia, MS 38668
P.O. Box 1020 Phone: 662-562-4474
permitrequest@cityofsenatobiams.gov

Commercial Pool Permit Application

Business name _____ Contact Person Name & Phone: _____
Mailing Address _____
Contractor _____ Phone _____
Contractor's License Number _____
Mailing Address _____
Project Address _____
Subdivision _____ Lot _____ Zone _____
Contractor/Business Email Address: _____
Use Under Permit To Be: _____
Description of work: _____

I hereby agree to comply with all City, State, and Federal Laws & Regulations and the current codes adopted by the City of Senatobia. If the first inspection is not obtained within 6 months and the final inspection within 2 years this permit is void.

_____ By initialing here, you acknowledge that your construction, project, renovation, etc. meets with the specifications of your Home Owner's Association and has been approved by them, if applicable.

Please allow 2-3 business days for your permit to be processed, you will be notified by email along with a copy of your permit, if approved.

Applicants Signature _____ Date _____

OFFICE USE ONLY

Intake Staff Person: _____ Date: _____
Permit Fee _____ Review Fee _____ Cash _____ Check # _____ CC _____ Receipt # _____
Approval Signature _____ Title _____
Date _____ Permit # _____