



City of Senatobia

MISSISSIPPI

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

RESIDENTIAL BUILDING PERMIT APPLICATION

Project Address _____

Subdivision _____ Lot _____ Zone _____

Setback Minimum from Property Line: (Zoning Covenant) Front _____ Rear _____ Side _____

Owner/Occupant _____ Phone _____

Mailing Address _____

Contractor _____ Phone _____

Mailing Address _____

Contractor/Owner Email Address: _____

Use Under Permit To Be: _____

City of Senatobia services:

Water Tap Receipt # _____ Sewer Tap Receipt # _____ Gas Tap Receipt # _____

Sq. ft. heated area main level _____ Size of Main Structure _____ x _____

Sq. ft. heated area other level (s) _____ Type of Construction _____

Total heated area _____

Sq. ft. unheated area _____

Total area _____ Valuation \$ _____

Compliance Bond: _____ (1 1/2% of valuation) Type Bond: _____

Size of lot _____ Plat required _____

Description of work: _____

Permit Fee _____ Review Fee _____ Paid by: Cash ___ Check # _____ Receipt # _____

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.

Please allow up to 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

Application Intake Staff : _____ Date: _____

Permit Fee _____ Review Fee _____ Paid by: Cash ___ Check # _____ Receipt # _____

Permit # _____ Date _____

Approval Signature _____ Title _____

