



# City of Senatobia

## MISSISSIPPI

131 N Front St Senatobia, MS 38668  
PO Box 1020 Ph. 662-562-4474 Ext. 3

### ROOFING PERMIT APPLICATION

Commercial or Residential

Project Address: \_\_\_\_\_  
Subdivision \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_  
Owner/Occupant \_\_\_\_\_ Phone \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Contractor \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Contractor/Owner Email Address \_\_\_\_\_  
Valuation of roofing project \$ \_\_\_\_\_

\*\*\*If project is being completed by a contractor, we will need a copy of the accepted bid for the project\*\*\*

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 (if applicable) and has been approved by them.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Office Use Only

Application Intake Staff: \_\_\_\_\_ Date \_\_\_\_\_

Permit Fee \_\_\_\_\_ Review Fee \_\_\_\_\_ Cash \_\_\_\_\_ CC \_\_\_\_\_ Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

Approval Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Permit # \_\_\_\_\_