



City of Senatobia

MISSISSIPPI

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

RESIDENTIAL OR COMMERCIAL 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 ½% 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, if approved.

Applicants Signature _____ **Date** _____

OFFICE USE ONLY

Application Intake Staff _____ **Date** _____

Permit Fee _____ **Review Fee** _____ **Cash** ___ **CC** ___ **Check #** _____ **Receipt #** _____

Approval Signature _____ **Title** _____

Permit # _____ **Date** _____