

**CITY OF FLORENCE, MS**

**BUILDING PERMIT APPLICATION**

P. O. Box 187  
Florence, MS 39073  
601-845-1992

Job Address: \_\_\_\_\_

**Owner:** \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Contractor (if different than owner):** \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Architect (or Design Professional):** \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**Subcontractors:**

Plumbing: \_\_\_\_\_

Mechanical: \_\_\_\_\_

Electrical: \_\_\_\_\_

Use of Building: Commercial _____ Residential _____ Other _____
Type of Work: New Construction _____ Remodel _____
Heated Square Footage: _____ Valuation of Work: \$ _____
Number of Buildings: _____ Number of Sleeping Units: _____
Water Connections: # _____ Size _____
Sewer Connections: # _____ Size _____
Fire System Connection Yes _____ No _____ Irrigation Meter Yes _____ No _____
<b>Is this project located within a floodplain: Yes _____ No _____</b>
<b>If this project is within a floodplain, a certificate of elevation must be furnished.</b>

Provide sediment and stormwater control measures to be taken.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I have read and understood this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with, whether specified herein or not.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date