

TAX PARCEL NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ DATE: \_\_\_\_\_, 20\_\_

**City of Ridgeland**

**APPLICATION FOR BUILDING PERMIT**

Type of Permit:

- A. Erection or Construction
- B. Repair or Alteration
- C. Excavation or Site Work
- D. Moving
- E. Demolition or Razing

Type of Structure

- |  |  |
|--|--|
| <u>New Residential Housekeeping Buildings</u>                    | <input type="checkbox"/> 324 Offices, banks, and professional            |
| <input type="checkbox"/> 101 Single-family house, detached       | <input type="checkbox"/> 325 Public works and utilities                  |
| <input type="checkbox"/> 102 Single-family house, attached       | <input type="checkbox"/> 326 Schools and other educational               |
| <input type="checkbox"/> 103 Two-family building                 | <input type="checkbox"/> 327 Stores and customer services                |
| <input type="checkbox"/> 104 Three- and four-family building     | <input type="checkbox"/> 328 Other non-residential buildings             |
| <input type="checkbox"/> 105 Five-or-more family building        | <input type="checkbox"/> 329 Structures other than buildings             |
| <u>New Residential Non-housekeeping Buildings</u>                | <u>Additions, Alterations, and Conversions</u>                           |
| <input type="checkbox"/> 213 Hotels, motels, and tourist cabins  | <input type="checkbox"/> 434 Residential (except garages and carports)   |
| <input type="checkbox"/> 214 Other non-housekeeping shelter      | <input type="checkbox"/> 437 Non-residential and non-housekeeping        |
|  | <input type="checkbox"/> 438 Additions of garages and carports           |
| <u>New Non-residential Buildings</u>                             | <u>Demolitions and Razing of Buildings</u>                               |
| <input type="checkbox"/> 318 Amusement, social, and recreational | <input type="checkbox"/> 645 Single family houses (attached or detached) |
| <input type="checkbox"/> 319 Churches and other religious        | <input type="checkbox"/> 646 Two-family buildings                        |
| <input type="checkbox"/> 320 Industrial                          | <input type="checkbox"/> 647 Three- and four-family buildings            |
| <input type="checkbox"/> 321 Parking garages                     | <input type="checkbox"/> 648 Five-or-more family buildings               |
| <input type="checkbox"/> 322 Service stations and repair garages | <input type="checkbox"/> 649 All other buildings and structures          |
| <input type="checkbox"/> 323 Hospitals and institutional         |  |

Location:

Street Address \_\_\_\_\_  
 Lot No. \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Square footage: \_\_\_\_\_ Current zoning \_\_\_\_\_  
 Number of residential units \_\_\_\_\_ Sewer tap needed? \_\_\_\_\_  
 Water meter size? \_\_\_\_\_ Water tap size? \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_

If Commercial:

No. Electrical outlets \_\_\_\_\_ No. Plumbing fixtures \_\_\_\_\_ No. Parking spaces \_\_\_\_\_

Location in Flood Zones:

A. Inside 100 year floodplain  
 Flood Insurance Rate Map Panel Number \_\_\_\_\_  
 Base Flood Elevation \_\_\_\_\_ Lowest Floor Elevation \_\_\_\_\_  
**FLOOD ELEVATION CERTIFICATE REQUIRED** \_\_\_\_\_  
 B. Outside 100 year floodplain

OWNER'S NAME AND ADDRESS:

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

Phone No. \_\_\_\_\_

CONTRACTOR'S NAME AND ADDRESS:

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

Phone No. \_\_\_\_\_

SUBCONTRACTOR'S NAME:

Electrical \_\_\_\_\_  
 Plumbing \_\_\_\_\_  
 Mechanical \_\_\_\_\_

PHONE NO.

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

I hereby certify that I am the owner, or the owner's agent for the purpose of applying for this permit; and the information set forth above is true and correct and the same may be utilized for all purposes, including tax assessment and levy. I understand that the building permit issued pursuant to this application is valid for six months after date of issuance.

Signature - Owner, Contractor, or Agent

Printed or typed name of person signing

APPROVAL OF PERMIT:

Date