



MULTI-FAMILY RESIDENTIAL BUILDING PERMIT APPLICATION

City of Starkville Community Development Department

City Hall, 110 W. Main Street

Starkville, Mississippi 39759-2823

Phone: (662) 323-8012 Fax: (662) 323-4143

e-mail: buildingdept@cityofstarkville.org

Project Street Address/Location _____

Subdivision _____ Lot Number _____

Owner's Name _____ Address _____

Phone Number _____ Cellular Number _____

Contractor's Name _____ Address _____

Phone Number _____ License Number _____

Estimated Construction Valuation \$ _____ Permit Cost \$ _____

Type of Project: New Addition Alteration Combination Addition/Alteration Repair Demolition

Number of Units: Duplex Triplex 4-plex 6-plex 8-plex Other _____

Frame Type: Wood Frame Masonry Structural Steel Reinforced Concrete Other _____

Square Footage: Building Footprint _____ Living (Heated/Cooled Area per Unit) _____

Patios/Decks _____ Parking Lot _____ Lot Size _____

Number of Stories: Single 2 Stories 3 Stories Other _____

Foundation: Concrete Slab Concrete Piers Masonry Piers Treated Wood Other _____

Description of Work _____

UTILITY INFORMATION

Electrical Service Panel Size Per Unit: 100 amp 125 amp 150 amp 200 amp Other _____

(NOTE: Multi-family Residential projects may require submittal of SED Electrical Load Data Sheet)

Number of Plumbing Clusters (bathrooms, laundry rooms, kitchens): _____

Number of Gas Outlets (water heaters, stoves, heating units, fireplaces, dryers): _____

SUB-CONTRACTOR INFORMATION

Plumbing _____ Phone _____

Electrical _____ Phone _____

Mechanical _____ Phone _____

Is property located within the 100-year floodplain? Yes No

Elevation Certificate Required? Yes No

The City of Starkville's Floodplain Ordinance requires the lowest floor elevation to be at least **2 feet** above the Base Flood Elevation.

FIRM Panel Number _____ Base Flood Elevation _____ Lowest Floor Elevation _____

DESIGN INFORMATION

Architect _____ Phone _____

Engineer _____ Phone _____

Site Plan _____ Approved By _____

Fire Protection _____ Approved By _____

Parking Plan _____ Approved By _____

Drainage Plan _____ Approved By _____

Erosion Control Plan _____ Approved By _____

I understand that in consideration for the issuance of the requested building permit, that I, the permittee, shall assume total responsibility for final cleanup of all trash, debris, and other construction materials or residue generated as a result of this permit. I also assume total responsibility for the removal of said debris and materials from the site and all public property and street right-of-way prior to final inspection.

Permittee is responsible for the following:

1. Contacting all utility providers regarding any location, relocation or abandonment of any utilities.
2. Contacting all utility providers prior to building under or near any electrical lines.
3. Insuring that no structure is built on any easement.
4. Complying with any restrictive covenants that apply to this property.
5. Complying with all applicable codes, ordinances and regulations.
6. Providing a current copy of applicable State contractor license to the Building Department.
7. Paying a re-inspection fee for any re-inspections required as a result of the work not being ready for inspection or not being in conformance with the applicable code when inspected.
8. Posting the issued building permit card and one set of approved plans on the jobsite at all times.

Submittal of this application is for review purposes only—3 sets of plans must accompany application.

I hereby acknowledge that I have read this application and state that all information provided is true and correct to the best of my knowledge and that I will abide by the above conditions.

Submitted by _____ Date _____

DO NOT WRITE IN THIS AREA—FOR OFFICE USE ONLY

Permit Fee Calculations:

Valuation _____

Valuation _____

Sub-Total _____

Plan Check Fee _____

Erosion Control _____

Plumbing Inspections _____

Sewer Inspection _____

Sub-Total _____

Gas Inspection _____

Electrical Inspections _____

5% Technology Fee _____

Total \$ _____

Water & Sewer Tap Fees:

_____ " Water Meter _____

_____ " Water Meter _____

_____ " Sewer Tap _____

Total \$ _____

Payment Type:

Cash / Check # _____

Receipt # _____

Permit # _____