



COMMERCIAL 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 _____
Project Name _____
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
Construction Type: Type I Type II Type III Type IV Type V Other _____
Square Footage: Building Footprint _____ Heated & Cooled _____
Under Roof _____ Parking Lot _____ Lot Area _____
Number of Stories: Single 2 Stories 3 Stories Other _____
Foundation: Concrete Slab Concrete Piers Masonry Piers Structural Steel Other _____
Description of Work _____

UTILITY INFORMATION

Electrical Service Panel Size Per Unit: 200 amp 800 amp 1,000 amp 1,200 amp Other _____
(NOTE: Commercial projects require submittal of SED Electrical Load Data Sheet)
Number of Plumbing Clusters (bathrooms, laundry rooms, kitchens): _____
Number of Gas Openings (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 and proof of insurance to the Building Department.
7. Posting the issued building permit card and one set of approved plans on the jobsite at all times.
8. 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.

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 the 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:	Water & Sewer Tap Fees:
Valuation _____	_____ " Water Meter _____
Valuation _____	_____ " Water Meter _____
Sub-Total _____	_____ " Sewer Tap _____
Plan Check Fee _____	Total \$ _____
Erosion Control _____	
Plumbing Inspections _____	Payment Type:
Sewer Inspection _____	Cash / Check # _____
Sub-Total _____	Receipt # _____
Gas Inspection _____	Permit # _____
Electrical Inspections _____	
5% Technology Fee _____	
Total \$ _____	