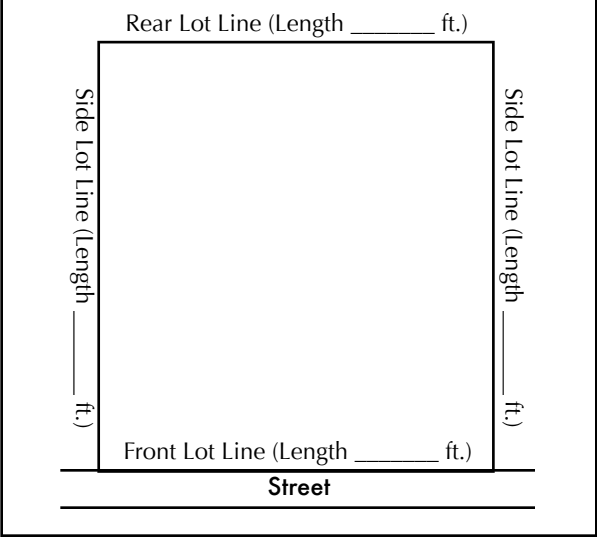


APPLICATION FOR BUILDING PERMIT

CITY OF PASS CHRISTIAN

Official Use Only	APPROVALS		Permit Number _____
	Zoning Office: _____	Date _____	Permit Issue Date _____
	Building Code: _____	Date _____	District: Fire _____ Zone _____
	Historic District? Y / N _____	Date _____	Sewer _____
			Util. _____ Elect. _____ Gas _____ Water _____

PERSON OR FIRM MAKING APPLICATION	Name _____	JOB LOCATION	Parcel No. _____
	Address _____		Address _____
	City, Town, RFD., No. _____ State _____ Zip _____		Verified by - Engineering Dept. _____
	Telephone _____		Legal Description: Lot _____ Block _____ (If no recorded map, give metes and bounds)
	Is applicant a Licensed Contractor? Yes <input type="checkbox"/> No <input type="checkbox"/>		Survey Range _____ Town _____ Sec. _____
	If Yes, provide license number & Issuing authority. Bldg. _____ Mississippi Limit _____		

DESCRIPTION OF WORK	Work Classified	Size, Etc.	PLOT and ZONING INFORMATION																																				
	<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alterations Structural Repair (Percentage) _____ <input type="checkbox"/> Other (Specify): _____	Number of Stories _____ Maximum Width _____ Maximum Length _____ Maximum Height _____ Heated Area _____ Area Under Roof _____ Total Floor Area _____		Site Plan showing Building Footprint and Lot Dimensions: 																																			
	Type Construction	Occupancy																																					
	<input type="checkbox"/> Fireproof <input type="checkbox"/> Fire Resistive <input type="checkbox"/> Heavy Timber <input type="checkbox"/> Non Combustible <input type="checkbox"/> Concrete Block <input type="checkbox"/> Wood Frame <input type="checkbox"/> Brick veneer/wood frame <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Duplex Dwelling <input type="checkbox"/> Multiple Dwelling <input type="checkbox"/> Public <input type="checkbox"/> Private #Baths _____ #Bedrooms _____ <input type="checkbox"/> Other (specify) _____																																					
	Type Foundation _____		Zone _____ Plot area (in square feet) _____ Setbacks: Front: (property line to front wall of building) _____ Side: _____ Rear: _____ # of employees on maximum working shift _____ # of Off-Street parking spaces provided _____ # of On-Street spaces available _____ # of Independent Residences _____ Are any structures presently located on plot? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain: _____ Planning Office Approval _____																																				
	Type Heat to be Provided _____																																						
	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 10%; text-align: center;">Will building or premises Include:</td> <td style="width: 10%;"></td> <td style="width: 10%; text-align: center;">Will General Contract Include:</td> <td style="width: 10%;"></td> </tr> <tr> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td>Automatic Sprinkler System</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Air Conditioning Other</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Accessory Structures Specify:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Elevators If yes give number:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other Specify:</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>		Will building or premises Include:		Will General Contract Include:			Yes	No	Yes	No	Automatic Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air Conditioning Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accessory Structures Specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Elevators If yes give number:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other Specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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OWNER	Name _____	First Floor Elevation is _____ feet above mean sea level.
	Address _____	Is architectural or engineering supervision included? Yes No If yes, by whom _____
PLAN DRAWN BY	<input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Designer	ARCHITECT _____ ENGINEER <input type="checkbox"/> <input type="checkbox"/>
	Name _____	State of Mississippi Registration Number <input type="checkbox"/> _____ Phone _____ <input type="checkbox"/>
	Address _____	
	Telephone _____	
	State of Mississippi Registration Number _____	

ADDITIONAL DATA	Additional Information _____
	Type Sewage Disposal _____ Approved By: _____
	Sub-Contractor _____

CERTIFICATION	Application is hereby made for a building permit to accomplish the work as herein described in accordance with duplicate plans, and/or specifications submitted herewith. It is agreed that all corrections in plans and/or specifications necessary for compliance shall be observed and all requirements of the building code, the zoning ordinance, and all other pertinent laws and ordinances, regulating construction shall be complied with in the pursuit of this work whether or not specified herein. I hereby certify: that I have read this application and that all information contained herein is true and correct; that I agree to comply with all applicable codes, ordinances and state laws regulating building construction; that I am the owner or authorized to act as the owner's agent for the herein described work; and that the total contract or valuation is \$ _____.
	NAME OF APPLICANT (print) _____ ASSOCIATION WITH OWNER _____
	DATE _____ SIGNATURE _____

APPLICATION FOR PERMIT TO DEVELOP IN A FLOOD HAZARD AREA

The undersigned hereby makes application for a permit in a designated flood hazard area. The work to be performed is described below and in attachments hereto. The undersigned agrees that all such work shall be done in accordance with the requirements of the Flood Ordinance (Ordinance No. 476) of the City of Pass Christian, Mississippi and with all other applicable local, state and federal regulations. All necessary required federal and State permits/certifications are attached.

APPLICANT'S NAME _____
ADDRESS/PHONE NO. _____
SITE ADDRESS _____
LEGAL DESCRIPTION/
TAX PARCEL # _____
NAME/ADDRESS OF
PROPERTY OWNER _____

A. DESCRIPTION OF WORK

1. PROPOSED DEVELOPMENT DESCRIPTION:

- | | |
|---|---|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> DREDGING |
| <input type="checkbox"/> ALTERATION OR REPAIR | <input type="checkbox"/> MANUFACTURED/MOBILE HOME/TRAILER |
| <input type="checkbox"/> FILLING | <input type="checkbox"/> LOGGING |
| <input type="checkbox"/> GRADING | <input type="checkbox"/> OTHER |

2. TYPE OF CONSTRUCTION

- | | |
|--|--|
| <input type="checkbox"/> NEW RESIDENTIAL | <input type="checkbox"/> IMPROVEMENT |
| <input type="checkbox"/> NEW NON-RESIDENTIAL | <input type="checkbox"/> RENOVATION |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> ACCESSORY STRUCTURE |
| | <input type="checkbox"/> TEMPORARY STRUCTURE |

3. Describe developmental project, E.G. plot area sq. ft., amt. of fill, grade elevation, elevation after fill, additional info.

B. ALTERATIONS, ADDITIONS OR IMPROVEMENTS TO AN EXISTING STRUCTURE.

1. Estimated market value of existing structure \$ _____
2. Cost of proposed construction \$ _____
3. If the cost of the proposed construction equals or exceeds 33 1/3% of the market value of the structure then the substantial improvement requirements shall apply. The notice to property owners must be completed and returned prior to issuance of a permit.

C. NON RESIDENTIAL CONSTRUCTION

1. Flood protection method
 Floodproofing
 Elevation
2. Please check the appropriate certification required in section E.

D. SUBDIVISIONS

1. Does this subdivision or other development contain 50 lots or 5 acres (whichever is less). Yes No
2. If Yes the base flood elevation data must be provided by the developer prior to issuance of a permit.

E. THE FOLLOWING CERTIFICATIONS CHECKED BELOW ARE APPLICABLE AND MUST BE SUBMITTED FOR ALL CONSTRUCTION WITHIN THE SPECIFIED TIME FRAME.

1. As built elevation certificate, certified by a registered land surveyor or professional engineer, must be submitted at the time of completion of the lowest floor, prior to any further vertical construction.
2. A floodproofing certificate, certified by a professional engineer or architect must be submitted at the time of completion of the lowest floor, prior to any further vertical construction.
3. For V-zones only. A breakaway wall certification certified by a registered professional engineer or architect and submitted with 7 days of completion of the breakaway walls.
4. For V-zones only. A certification on the superstructure and substructure design must be submitted with this permit application
5. The proposed development is located in an identified floodway and a no-rise certification completed by a registered profession engineer must be submitted prior to the issuance of a permit or the start of construction.
6. The proposed development includes an alteration of a watercourse and a letter of map revision issued by the federal emergency management agency is required. This documentation must be submitted within 6 months of completion of the project.

APPLICANT'S SIGNATURE _____

DATE _____

FOR INTERNAL USE ONLY:

1. Community Number: _____
2. Panel Number: _____
3. Zone: _____
4. Base flood elevation at site: _____ Ft. MSL
5. Required lowest floor elevation inc. Basement _____
6. If the structure is to be floodproofed the required floodproofing elevation is _____ ft. MSL
7. Elevation to which all attendant utilities, inc. all heating, duct work, and electrical equipment will be installed or floodproofed.
_____ ft. MSL

APPROVED:

COMMUNITY OFFICIAL _____

TO: PROPERTY OWNERS ACTING AS GENERAL CONTRACTORS

HOUSE BILL NO. 868 (RESIDENTIAL BUILDERS LAW) PROVIDES THAT ANY PERSON WHO UNDERTAKES CONSTRUCTION OR IMPROVEMENT ON HIS OWN RESIDENCE OR HIS OTHER REAL ESTATE HOLDINGS, OR WHO ACTS AS HIS OWN GENERAL CONTRACTOR IN THE PERFORMANCE ON CONSTRUCTION OR IMPROVEMENT ON HIS OWN RESIDENCE OR ON HIS OTHER REAL ESTATE HOLDINGS OR WHO ACTS UNDER THE SUPERVISION OF THE OWNER OCCUPANT WHO IS THE GENERAL CONTRACTOR MAY DO SO WITHOUT BENEFIT OF OBTAINING ANY GENERAL CONTRACTORS OR BUILDERS LICENSE.

However, the Pass Christian Building Department offers the following information if you are going to act as your own general contractor so that you may be aware of any liability associated with your undertaking.

1. You may be financially responsible for any person who is working under your direction and injured while working on your job. This financial responsibility may include hospitalization costs, unemployment compensation, and lawsuits for lost wages and workmen's compensation. Homeowner's or builder's risk policies do not cover this type of loss.
2. You may be responsible for withholding taxes, including Unemployment taxes, Social Security taxes and matching Social Security Benefits, on all persons working under your direction and supervision.
3. If you do not obtain General Liability Insurance, you may be personally liable for any injury or any other person, other than those mentioned above, that occurs on your property while construction is in process. Your homeowner's or builder's risk policy does not cover this type of loss.
4. The Mississippi Supreme Court has ruled in precedent setting case that all persons named as contractor on a Building Permit for the construction of a residence is deemed the responsible party for losses by future owners. If major structural damage occurs, up to (10) ten years after construction, and if you are general contractor on the permit, then you assume this responsibility. This responsibility cannot be superseded by any secondary waiver with any person or uninsured company.
5. If a homeowner employs a licensed general contractor, the possibility of claims being made against the homeowner is eliminated to a great extent. If an owner acts as a general contractor, this protection is lost.
6. The homeowner employs a licensed general contractor, the possibility of claims being made against the homeowner is eliminated to a great extent. If all owner acts as a general contractor, this protection is lost.

THE ABOVE LIST IS NOT INTENDED TO SERVE AS A LEGAL GUIDE, OR TO PROVIDE ANY ADVICE IN ANY MANNER, NOR IS IT ALL ENCOMPASSING, BUT ONLY TO PROVIDE INFORMATION.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE AND FOREGOING.

PROPERTY DESCRIPTION:

DATE

HOMEOWNER'S SIGNATURE

PARKING PLAN

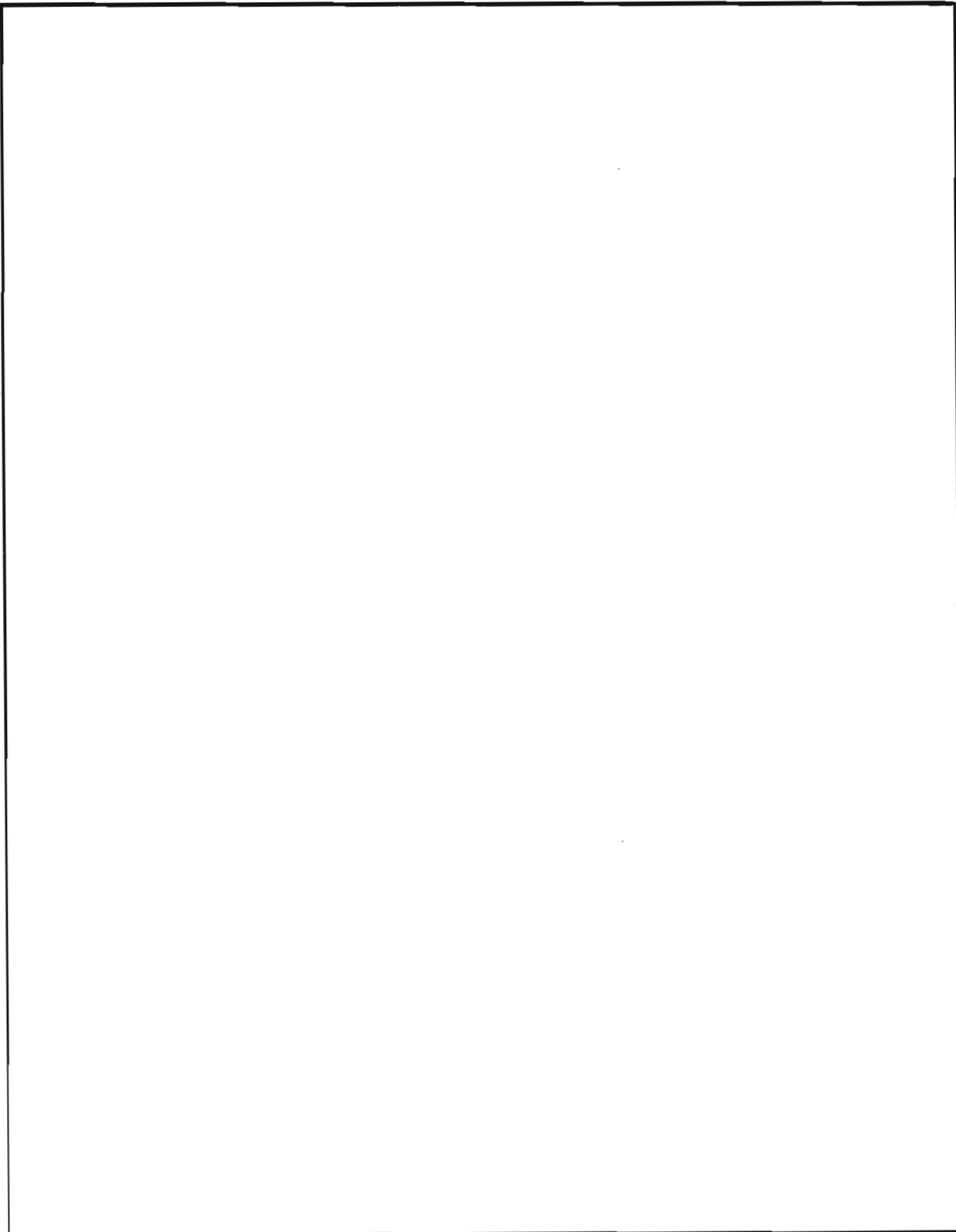
A PART OF THE BUILDING PERMIT APPLICATION

CITY OF PASS CHRISTIAN

PARCEL No.: _____ ADDRESS of Site: _____

Driveway construction type: Concrete Loose fill (shell, gravel) with confinement by _____
Note loose fill drives must be confined with edging guaranteed to last for 20 years or more.

Sketch the site below showing the following: abutting public streets and alleys, lot dimensions, all setbacks, any protected trees on the site (or other trees you wish to keep), planned or existing driveway and parking areas including pavement width. Indicate overnight parking areas (including garage space) and the total number of provided off-street spaces.



Applicant Signature: _____ Date: _____

Planning Office Approval: _____