



Residential Building Permit Application
 City of Biloxi, Planning Division
Mailing Address: P.O. Box 508, Blvd., Biloxi, MS 39530
 Office Location: 676 Dr. MLK Blvd.,
 Building (228) 435-6270 Planning (228) 435-6266 Fax (228) 435-6188

Application number _____ Date issued _____

Applicant: Owner Engineer Architect Contractor Other _____

Owner's Name _____ Telephone _____

Project Address _____ Lot Number _____

Mailing Address _____ Estimated Cost (\$) _____

Project Description: New Construction Addition Repair/Renovate Other

PLEASE DESCRIBE WORK PROPOSED: _____

Contractor's Name _____ City License # _____

(If applicable) Contractor Phone # _____

Owner/Applicant Signature: _____ Date _____

Staff Use Only

Parcel _____

Old Flood Zone _____ Permits since 2012 Yes No

FEMA Flood Zone A, AE, or AH CAZ VE SX or X

Floodway Yes No Design Flood Elevation _____ Cumulative % _____

Flood Plain Manager Signature _____ Date: _____

Will this project require an AHRC Hearing? ___No ___Yes Case No. _____

Will this project require a Planning Commission Hearing? ___No ___Yes

Current Zoning _____ PC Case No. _____ (if applicable)

Current Use _____ Proposed Use _____

Setbacks: Front _____ Back _____ Left _____ Right _____

Impervious % _____

Planning Signature _____ Date _____

CITY OF BILOXI
HOME OWNER CERTIFICATE OF COMPLIANCE

* * * NOTICE TO HOME OWNER * * *

It is strongly suggested that you contract this project with a licensed general contractor. Acting as your own general contractor makes you responsible for all construction and code requirements. You may not have any recourse against any subcontractors you hire to complete this project. You could also be liable should anyone be injured during project construction. It is not recommended that you act as your own general contractor.

City of Biloxi Application # _____

Physical Address of Home _____

THE UNDERSIGNED HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT:

1. I am the legal owner of record of the property described above, and
2. The property described above is my principal place of residence, or if the application is for a permit to construct a new residence, the new residence will be my principal place of residence upon completion, and
3. I am familiar with applicable construction codes, city ordinances, and state laws for such construction activity, and
4. All work under the permit issued, as a result of this application, will be performed by me or under my direct supervision, and
5. All work must be completed in conformance with current applicable construction codes and must pass inspections by City Inspectors, and
6. I will pay any fees as a result of work not being ready for inspection or not being in conformance with the applicable codes when inspected, and
7. If after the work has been inspected the Building Official determines that I do not have the knowledge and /or experience to complete the work in conformance with applicable construction codes, city ordinances, and state laws, the Building Official may stop the work and require me to engage a licensed and bonded contractor to complete the permitted work.

A COPY OF THIS CERTIFICATE WILL BE SENT TO
THE MISSISSIPPI STATE BOARD OF CONTRACTORS.

Owner Signature _____ Date _____