



# Subcontractor Permit Application

City of Biloxi, Office of the Building Official  
676 Dr. Martin Luther King Jr., Blvd, Biloxi, MS 39530  
Ph. (228) 435-6270 Fax (228) 435-6188

Permit/Application number: \_\_\_\_\_

Project Address: \_\_\_\_\_

Project/Owner Name: \_\_\_\_\_

## CONTRACTORS/APPLICANT'S INFORMATION

Name: \_\_\_\_\_ City License# \_\_\_\_\_ Phone # \_\_\_\_\_

## PERMIT TYPE:

- Mechanical       Electrical       Plumbing/Gas
- Fire Sprinkler       Fire Alarm       Hood System
- Hood Suppression System       Irrigation System
- Fire Suppression System

Fully Describe Work Proposed: \_\_\_\_\_

Project cost: \_\_\_\_\_ Check# \_\_\_\_\_

*I HEREBY MAKE APPLICATION FOR PERMIT TO PERFORM WORK AS DESCRIBED HEREIN AND IF PERMIT IS GRANTED I AGREE TO CONFORM TO ALL REGULATIONS AND ORDINANCES OF THE CITY OF BILOXI PERTAINING HERETO AND IN ACCORDANCE WITH THE PLANS SUBMITTED. I ACKNOWLEDGE THAT THIS PERMIT WILL EXPIRE SIX (6) MONTHS FROM THE DATE OF APPROVAL.*

Applicant's Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_