



Residential Building Permit Application

City of Biloxi, Community Development Department
676 Dr. Martin Luther King Jr., Blvd., Biloxi, MS 39530
Building (228) 435-6270 Planning (228) 435-6266 Fax (228) 435-6188

Date _____	App# _____	_____
	Date Issued _____	_____

Applicant: Owner Engineer Architect Other _____

Owner's Name _____

Project Address _____ Parcel # _____

Mailing Address _____

Telephone _____ Email _____

Project Description New Addition Repair/Renovate Other _____

Estimated Cost (\$) _____

Contractor's Name _____ City License # _____

Applicant Signature _____ Date _____

For Staff Use: Old Flood Zone _____	
FEMA Flood Zone <input type="checkbox"/> A, AE, or AH	<input type="checkbox"/> CAZ <input type="checkbox"/> VE <input type="checkbox"/> SX or X
Floodway <input type="checkbox"/> Yes <input type="checkbox"/> No	Comulative% _____
Design Flood Elevation _____	Signature _____
Will this project require an AHRC Hearing? ___No ___Yes	
Will this project require a Planning Commission Hearing? ___No ___Yes	
Current Zoning _____	
Current Use _____ Proposed Use _____	
Setbacks: Front _____ Back _____ Left _____ Right _____	
Impervious % _____	Signature _____

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 _____