



Hinds County

M I S S I S S I P P I

DEPARTMENT OF PERMIT AND ZONING

Phone: 601-355-5424

Hours of Operation: Monday-Friday 8:00 am - 4:30 pm

Mailing Address: P.O. Box 640
Raymond, MS 39154

Physical Address: 127 W. Main Street Raymond Courthouse Annex
Raymond, MS 39154

Application Date: _____ Was a violation issued for work without a permit? Yes No

Type of Permit: Building Mobile Home Electrical, Gas, Storm water Other _____

SECTION 1: LOCATION

Permit Holder Name _____ Parcel Number _____ Property Zoning _____

No. and Street _____ City/Town _____ Zip Code _____

Contractor Name Company Name and MBOC license number _____

No. and Street _____ City/Town _____ Zip Code _____

SECTION 2: PROPOSED WORK (Check All That Apply)

New Construction Addition Alteration Commercial Residential Other _____

Are building plans and/or construction documents being supplied as part of this permit application? Yes No

Have plans been approved? Yes No

Brief Description of Proposed Work: _____

SECTION 3: BUILDING HEIGHT AND AREA (To be completed by office staff only.)

Permit Valuation	Existing		Proposed	
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No. of Floors/Stories & Area Per Floor (sq. ft.)				
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Total Area (sq. ft.) and Total Height (ft.)				
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SECTION 4: SITE INFORMATION (To be completed by office staff only.)

Water Supply:	Flood Zone Information:	Sewage Disposal:	Debris Removal:	Building use
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Public <input type="checkbox"/>	Check if outside Flood Zone <input type="checkbox"/>	Municipal <input type="checkbox"/>	Licensed Disposal Site <input type="checkbox"/>	Building classification
Private <input type="checkbox"/>	Identify Flood Zone: _____	On-site System <input type="checkbox"/>		_____

If you are applying for this permit as a result of a violation, a violation fee will be added to the permit fee per Hinds County Zoning Ordinance.

Expiration of application: This permit expires in 2 years from the date of purchase.

Inspections required: Approved Hinds County inspections must be completed before work performed in enclosed or covered.

Terms and Conditions:

Indemnity: I, Permit Holder, shall indemnify, defend and hold harmless Hinds County, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Date: _____ Signature _____
Permit Holder