

CITY OF POPLARVILLE BUILDING PERMIT CHECKLIST

- _____ BUILDING PERMIT APPLICATION
- _____ BUILDING PLAN APPROVAL from MS. STATE DEPT. OF HEALTH (food establishments only)
- _____ ZONING ORDINANCE and ZONING PERMIT APPLICATION
- _____ EXCAVATION PERMIT APPLICATION - \$25.00 (Includes Line Locate)
- _____ LANDSCAPE ORDINANCE and LANDSCAPE PERMIT APPLICATION
- _____ ELECTRIC PERMIT APPLICATION - Residential: \$65.00/Commercial: 1% of Contract (minimum fee \$50.00)
- Temporary pole: \$25.00
- _____ MECHANICAL PERMIT APPLICATION- Residential \$40.00 per unit/Commercial 1% of Contract (minimum \$50.00)
- _____ PLUMBING PERMIT APPLICATION - \$10.00 and up
- _____ GAS PERMIT APPLICATION - \$25.00
- _____ PERMIT FEES LIST
- _____ SEWER TAP - Contact Pearl River County Utility Authority at 601/799-5259
- _____ WATER TAP - 3/4" tap: \$525.00/1" tap: \$625.00/2" tap: \$1625.00
All water taps must be made by the City of Poplarville.
All water meters must be purchased through and installed by the City of Poplarville.
Tap fee and deposit must be paid at the same time; owner deposit \$50.00/renter deposit \$125.00.
Any charges incurred by the City of Poplarville for road bores, permitting, and bonding must be paid to the City of Poplarville by the customer or contractor prior to water service delivery.
Water will not be turned on until the City of Poplarville receives either a Mississippi State Department of Health Form 335 "Onsite Wastewater System – Final Approval" OR evidence that sewer service has been obtained from the Pearl River County Utility Authority.
Installation of wheel or ball valve cut off on water line outside of structure is required.
Any building with multiple units shall be metered separately.
Any building subdivided after initial construction shall be metered separately.
- _____ WATER PROCEDURES
- _____ BACK FLOW PREVENTION INFORMATION (CROSS CONNECTIONS)
- _____ PRIVILEGE LICENSE APPLICATION (business only) **PLEASE PRINT:**
- _____ SIGN ORDINANCE and SIGN PERMIT APPLICATION _____
Project Name
- _____ HANDICAP PARKING COLOR STANDARD _____
Project Address
- _____ LIGHTING INFORMATION _____
Representative
- _____ FIRE HYDRANT SPECIFICATION

SIGN AND RETURN TO CLERK _____
Signature Date

WE ARE AN EQUAL OPPORTUNITY SERVICE PROVIDER