TAVDARCELNO	-	PERMIT NO.0002	_DATE: 2/15, 2022
TAX PARCEL NO		I LIGHT TO.	

## CITY OF GLUCKSTADT

APPLICATION FOR BU	ILDING PERMIT	
Type of Permit:	D. Moving	
A. Erection or Construction	E. Demolition or Razing	
B. Repair or Alteration C. Excavation or Site Work		
C. Excavation of one work		
Type of Structure:	324 Offices, banks, and professional	
New Residential Housekeeping Buildings	325 Public works and utilities	
101 Single-family house, detached 102 Single-family house, attached	326 Schools and other educational	
102 Single-rainity house, attached	327 Stores and customer services	
104 Three- and four-family building	328 Other non-residential buildings	
105 Five-or-more family building	329 Structures other than buildings	
New Residential Non-housekeeping Buildings	Additions, Alterations, and Conversions	
213 Hotels, motels, and tourist cabins	434 Residential (except garages/carports)	
214 Other non-housekeeping shelter	437 Non-residential and non-housekeeping	
	438 Additions of garages and carports	
New Non-residential Buildings	Demolitions and Razing of Buildings	
318 Amusement, social, and recreational 319 Churches and other religious	645 Single family houses (attach/detach)	
320 Industrial	646 Two-family buildings	
321 Parking garages	647 Three- and four-family buildings 648 Five-or-more family buildings	
320 Industrial 321 Parking garages 322 Service stations and repair garages	649 All other buildings and structures	
323 Hospitals and institutional	OH) All other darkings	
Location:	- 01	
Street Address 238 We senberger Lot No Block Subdivision Square Footage of Building Current Zon	ICS	
Lot No Block Subdivision	ino	
Number of Residential UnitsCurrent Zon	ing	
Square Footage for Plan Review		
Cost of Construction \$ 15,000  Permit Cost \$ 0000		
Permit Cost #9000		
- 1) Commercial - 10.		
Location in Flood Zones:		
A. Inside 100 year floodplain		
Flood Insurance Rate Map Panel Number		
Flood Insurance Rate Map Panel NumberLov	west Floor Elevation	
FLOOD ELEVATION CERTIFICATE REQUI	RED	
B. Outside 100 year floodplain	CONTER A CTORIS	
OWNER'S NAME AND ADDRESS:	CONTRACTOR'S COMPANY NAME AND ADDRESS:	
John Wood	COMPANY NAMED INDUSTRIES	
John Wood 235 Weisenberger RI		
Ma Lison, Ms. 39170 Phone No. 601-259-0837		
Phone No. (601-25)	Phone No.	
SUBCONTRACTOR'S COMPANY NAME AND SIG	GNATURE: PHONE NO.	
ElectricalPlumbing		
Plumbing		
	and the state of t	
I hereby certify that I am the owner, or the owner's agent	for the purpose of applying for this permit applifued to	
. c faith above is true and correct and the Sai	me may be utilized for all purposes, included	
assessment and levy. I understate that the building permi	it issued pursuant to this application a day	
months after date of issuance.		
	APPROVAL OF ERMAL	
Signature - Owner, Contractor, or Agent	( ) w the second	
	The same of the sa	
	The state of the s	
Printed or typed name of person signing	AC OLL	