

TAX PARCEL NO. \_\_\_\_\_ PERMIT NO. 0003 DATE: 2/28, 2022

**CITY OF GLUCKSTADT**  
**APPLICATION FOR BUILDING PERMIT**

**Type of Permit:**

- A. Erection or Construction
- B. Repair or Alteration
- C. Excavation or Site Work
- D. Moving
- E. Demolition or Razing

**Type of Structure:**

- New Residential Housekeeping Buildings
  - 101 Single-family house, detached
  - 102 Single-family house, attached
  - 103 Two-family building
  - 104 Three- and four-family building
  - 105 Five-or-more family building
- New Residential Non-housekeeping Buildings
  - 213 Hotels, motels, and tourist cabins
  - 214 Other non-housekeeping shelter
- New Non-residential Buildings
  - 318 Amusement, social, and recreational
  - 319 Churches and other religious
  - 320 Industrial
  - 321 Parking garages
  - 322 Service stations and repair garages
  - 323 Hospitals and institutional
- Additions, Alterations, and Conversions
  - 324 Offices, banks, and professional
  - 325 Public works and utilities
  - 326 Schools and other educational
  - 327 Stores and customer services
  - 328 Other non-residential buildings
  - 329 Structures other than buildings
  - 434 Residential (except garages/carports)
  - 437 Non-residential and non-housekeeping **Build-out**
  - 438 Additions of garages and carports
- Demolitions and Razing of Buildings
  - 645 Single family houses (attach/detach)
  - 646 Two-family buildings
  - 647 Three- and four-family buildings
  - 648 Five-or-more family buildings
  - 649 All other buildings and structures

**Location:**

Street Address 272 Calhoun Station Parkway Ste 8G  
 Lot No. \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Square Footage of Building \_\_\_\_\_ Current Zoning C-2  
 Number of Residential Units \_\_\_\_\_

Square Footage for Plan Review \_\_\_\_\_  
 Cost of Construction \$ 273,541

Plans Review Fee: \$200.00  
 Permit Fee: \$982.00  
 Total: \$1182.00  
 pc clc 2888

If Commercial: MPC No. \_\_\_\_\_

**Location in Flood Zones:**

- A. Inside 100 year floodplain
- Flood Insurance Rate Map Panel Number \_\_\_\_\_
- Base Flood Elevation \_\_\_\_\_ Lowest Floor Elevation \_\_\_\_\_

**FLOOD ELEVATION CERTIFICATE REQUIRED**

- B. Outside 100 year floodplain

**OWNER'S NAME AND ADDRESS:**

Dr. Catasha Arrington  
272 Calhoun Sta, Pkwy ste 8G  
Madison, MS. 39110  
 Phone No. 601-720-2507

**CONTRACTOR'S**

**COMPANY NAME AND ADDRESS:**

Matthew Walters Const. LLC  
116 Sandstone Dr.  
Brandon, MS. 39042  
 Phone No. 601-940-8737

**SUBCONTRACTOR'S COMPANY NAME AND SIGNATURE:**

Electrical \_\_\_\_\_  
 Plumbing \_\_\_\_\_  
 Mechanical \_\_\_\_\_

**PHONE NO.**

I hereby certify that I am the owner, or the owner's agent for the purpose of applying for this permit, and the information set forth above is true and correct and the same may be utilized for all purposes, including tax assessment and levy. I understand that the building permit issued pursuant to this application is valid for six months after date of issuance.

Matthew Walters  
 Signature - Owner, Contractor, or Agent

Matthew Walters  
 Printed or typed name of person signing

**APPROVAL OF PERMIT**

2-28-22  
 Date

