



Southaven Fire Department

Fire Marshal's Office

8710 Northwest Drive

Southaven, Mississippi 38671

Phone: 662-393-7466

Fax: 662-280-6521

PERMIT APPLICATION / PERMIT

(If approved – this document shall be posted in a conspicuous place for the public and Fire Prevention Division)

Name of Business or Project: _____

Address of location / event requiring permit: _____

Name of Person or Company (Permittee) requesting permit: _____

Address of Person or Company (if different from above): _____

Phone Number: _____ Fax Number: _____ e-mail address: _____

Type of permit requested (based on review of attached permit descriptions and assigned fees): _____

Additional explanation (if necessary):

Fee (based on review of attached permit descriptions and assigned fees): _____

Make check payable to the City of Southaven; fee is required prior to issuance of permit

Permittee agrees to hold the City of Southaven ("City") harmless and indemnify the City for any and all claims or suits which may result from activities allowed by this permit.

Signature of Applicant and Date _____

Applicant provide information requested above this line

Fire Prevention Division provide information requested below this line

Description of requirements related to this permit based upon adopted Fire Code and Ordinances:

Granted this date: _____ by: _____

<i>For Fire Prevention Division Use Only</i>	
Permit issue date: _____	Permit expiration date: _____

Upon expiration, applicant is required to re-file for permit; permit shall be subject to inspection at the discretion of the Fire Prevention Division

The applicant must comply with all applicable local, state, and federal regulations, codes, and ordinances. Revised May 8, 2017 TAR