

**CITY OF LONG BEACH
APPLICATION FOR
DRAINAGE MODIFICATION PERMIT**

Name of Owner: _____

Address: _____

Phone: (H) _____ (W) _____

Contractor (If Applicable) _____

Address _____

Phone _____

TYPE OF ALTERATIONS REQUESTED

(Check one)

Manmade Swale _____

Piping or Culverts _____

Ditch _____

Canal _____

Other _____

Structures which convey rainwater runoff along a public street or drainage easement, or which conveys rainwater runoff, which is, generated from lands not all under same ownership.

Please attach a drawing with sufficient detail to fully indicate existing drainage facilities, and proposed modifications.

NOTE: Other documents may be required before approval of Permit Application form. Major projects will require detailed plans, stamped by an Engineer registered in the State of Mississippi

Owner / Contractor: _____

Fee: _____

Cash / Check: _____

**PROJECT APPROVAL PROCESS
Public Works Department**

Approved: _____

Disapproved _____

By _____

Title _____

Date _____

AFTER THE APPROVAL PROCESS TWO INSPECTIONS ARE REQUIRED

1. Before work is covered up an inspection is required by Utility Partners

Approved _____

Disapproved _____

By _____

Title _____

Date _____

2. After Completion of project a final inspection is required by Utility Partners

Approved _____

Disapproved _____

By _____

Title _____

Date _____