

**COUNTY OF DESOTO, MISSISSIPPI**  
**365 Loshier Street, Suite 200**  
**Hernando, MS 38632**  
**Phone: (662) 469-8023**

**COUNTY BUILDING DEPARTMENT – LICENSE DIVISION**

Application for Licensed Mechanical Contractor

APPLICATION FEE: \$25.00 RENEWAL FEE \$30.00

The undersigned person, firm or corporation requests DeSoto County License Commission to inquire into the qualification of:

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Are you now or have you ever been a “master” licensee? YES \_\_\_\_\_ NO \_\_\_\_\_

Must have a \$5,000.00 bond in the licensee name made payable to DeSoto County.

I, the undersigned, hereby apply for a license as a mechanical contractor in DeSoto County, MS., pursuant to the provisions of an order passed by the DeSoto County Board of Supervisors dated October 6, 1965, and I do certify that the answers to the foregoing questions are true and correct; and in consideration of the grant of a license to me I do hereby agree to abide by all terms and provisions of said orders and to all things therein required.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE (Printed or typed): \_\_\_\_\_