

APPLICATION FOR:

CONDITIONAL USE: _____

Conditional Use permit is good for two years only.

SITE PLAN REVIEW: Mobile Home Park _____ Subdivision _____

TEMPORARY PERMIT: Mobile Home _____ Mobile Home Renewal _____

Mobile Home temporary permit is good for one year only. Application must be made yearly.

ZONING: Change From Zone _____ To Zone _____

Setback _____

Variance _____

REQUIRED FOR ALL OF THE ABOVE: Deed with legal description; Plot plan drawn to scale; Public Hearing with Notice

Office Use Only: Fee Paid _____ Receipt # _____ By _____ Date _____

POPLARVILLE PLANNING COMMISSION APPLICATION FOR ZONING PERMIT

PLEASE PRINT

FOR THE PROPERTY LOCATED AT _____

E911 Address Form required for undeveloped properties and new construction.

1. APPLICANT:

Name _____

Street Address _____

Mailing Address _____

Phone: Work _____ Home _____ Cell _____

2. OWNER (If other than applicant):

Name _____

Street Address _____

Mailing Address _____

Phone: Work _____ Home _____ Cell _____

This property is located on the: _____ north _____ south _____ east _____ west side of

_____ (street), between the intersecting streets of

_____ and _____

on Lot # _____ Block # _____ in _____ Subdivision and is zoned

3. This property has a frontage of _____ feet and is _____ feet deep. It contains _____ square feet or _____ acres. It is occupied by _____ (# of) buildings used for _____ purpose (or: is vacant _____).

4. The property to the north is used for _____ and is zoned _____.

The property to the east is used for _____ and is zoned _____.

The property to the south is used for _____ and is zoned _____.

The property to the west is used for _____ and is zoned _____.

5. Purpose for request: _____

SETBACK: Zoning ord. requires _____ front, _____ side, _____ rear (# feet set back from property line.)

Proposed setback: _____ front, _____ side, _____ rear (# ft. from prop. line)

Cond. Use requested: _____ front, _____ side, _____ rear (difference in # feet)

6. One of the following conditions must be met before a zoning change can be recommended. Check the condition(s) most applicable to your request, and explain.

_____ A. A material change in the circumstances and conditions of the neighborhood and area surrounding the petitioned property since the enactment of this ordinance.

_____ B. A mistake in the original zoning of the property.

_____ C. There is a public need for the change in question, based on the Comprehensive Plan and the Comprehensive Planning Process.

_____ D. Annexation

7. PARKING: Paved parking will be provided for _____ (#) cars with _____ (#) loading spaces.

8. BUFFER: A landscaped buffer/open space will be provided as follows:

North _____

East _____

South _____

West _____

9. Are there any code violations on file with the City? _____ If yes, explain: _____

10. Is the property in an Historic or Overlay District? _____ If yes, explain: _____

11. If the property is located in a subdivision, is there a Restrictive Covenant on file for that subdivision in the Pearl River County Chancery Clerk's office? _____ If yes, explain: _____

12. MOBILE HOME TEMPORARY PERMIT:

Mobile home constructed for wind area zone: _____ I, _____ II (minimum), or _____ III.

13. **ATTACH THE FOLLOWING (required):**

_____ Deed with legal description.

_____ Plot plan showing lot dimensions, existing buildings and their setbacks, parking, buffer strips.

_____ A legal opinion or an affidavit attesting to the signatures of all owners of record. The affidavit must be sworn to before a notary public.

YOU SHOULD ATTEND THE PLANNING COMMISSION MEETING TO ENSURE THAT YOU WILL BE AWARE OF THE DATE OF THE PUBLIC HEARING AND YOUR ADVERTISING REQUIREMENTS. ATTENDANCE AT THE PUBLIC HEARING AND AT THE MEETING OF THE MAYOR AND BOARD OF ALDERMEN IS RECOMMENDED SO THAT ANY QUESTIONS MAY BE FULLY ANSWERED.

We are an Equal Opportunity Service Provider

I HEREBY CERTIFY THAT ALL INFORMATION GIVEN ON THIS APPLICATION AND ITS ATTACHMENTS IS TRUE AND CORRECT.

Signature of Applicant: _____ Date: _____

Witnessed this the _____ day of _____, 20_____

City Clerk / Deputy Clerk

* * * * *

WITNESS THE SIGNATURES of the owner of the subject property, on this, the _____ day of _____, A.D. _____.

Property owner(s)

**STATE OF MISSISSIPPI
COUNTY OF PEARL RIVER
CITY OF POPLARVILLE**

Personally came and appeared before me, the within named _____, who acknowledged to me that they signed and delivered the above and foregoing instrument as and for their free act and deed on the day and year therein mentioned, and who acknowledged to me that they are the owners of the property described in Paragraph 2 of the foregoing application.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE, this, the _____ day of _____, A.D. _____.

Notary Public

MY COMMISSION EXPIRES:
