

FOR OFFICE USE ONLY

DATE: _____

Please check one of the following:

- _____ Rezoning FROM _____ To _____
- _____ Special Exception
- _____ Variance
- _____ Text Amendment

CASE NUMBER: _____

PROPERTY ADDRESS: Please attach a copy of your Warranty Deed or a Survey which contains a legal description.

Street Number _____

Street Name _____

TAX PARCEL NUMBER: _____

APPLICANT'S INFORMATION:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone (W) _____ Telephone (H): _____ Fax: _____

REPRESENTED BY:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (W) _____ Fax: _____ E-mail: _____

CURRENT PROPERTY OWNER(S):

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone:(W): _____ Fax: _____ E-mail: _____

DETAILED PROPERTY INFORMATION

1. This property is located on the _____ side of _____
(North/South/East/West) Street Name

2. Size of property: Lot Frontage _____ feet
Lot Depth _____ feet
Square footage/Acres _____
Improved or Unimproved? _____
If improved, number of existing buildings? _____
Use of buildings: Residential Commercial Industrial

3. Purpose for Rezoning, Variance, Text Amendment or Special Exception: (Brief Description)

4. Are there any Code violations on file on this property with the City? _____

5. If you answered yes to question 4, please give details and dates of violation(s). _____

6. Does the property have Restrictive Covenants? _____ If yes, attach a copy of all decisions of the Restrictive Covenants.

7. Has any Zoning Action been filed for this property in the past? _____ If yes, attach a copy of all decisions of all agency findings, Council and Court decisions.

APPLICATION FEE SCHEDULE

_____	Rezoning	\$300.00
_____	Special Exception	\$200.00
_____	Variance - Bulk & Density	\$100.00 for each additional Variance request
_____	Text Amendment	\$300.00
_____	Total Fees to be included with Application	

DECLARATION:

By signing this application, it is understood and agreed that permission is hereby given the duly authorized representative of the City of Natchez to make an investigation of the need for the (Rezoning, Special Exception, and/or Variance); place signs on the property, and verify the authenticity of the applicant(s) and property owner(s). It is further understood that the Planning Director and staff may inspect the subject property, take photographs, and obtain any verifications, and data necessary for preparation of its report, Planning Commission, and/or Board of Aldermen.

The above information is true, and complete to the best of my knowledge.

WITNESS THE SIGNATURE(S) of the owner(s) of the subject property located at

_____ Natchez, MS
Street Address

On this the _____ day of _____, 20_____

**STATE OF MISSISSIPPI
COUNTY OF ADAMS**

Personally came and appeared before me, the within named

who 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 acknowledge to me that they are the owner(s) of the subject property as described in this Request for Development Application.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE, this the _____ day of _____, 20_____

NOTARY PUBLIC

MY COMMISSION EXPIRES: (Official Seal)
