

**SIGN VARIANCE APPLICATION  
OR  
SIGN SPECIAL USE PERMIT  
APPLICATION**

**CITY OF FLOWOOD, MISSISSIPPI  
2101 AIRPORT ROAD  
P. O. BOX 320069  
FLOWOOD, MISSISSIPPI 39232-0069**

**PHONE 601-939-4279  
FAX 601-420-3332**

## TABLE OF CONTENTS

	PAGE
SIGN ACTION PUBLICATION	1 & 2
INSTRUCTIONS & GENERAL INFORMATION	3, 4 & 5
SCHEDULE FOR FILING DEADLINES	6
NOTIFICATION OF PROPERTY OWNERS	7
PROPERTY OWNERS WITHIN 160 FEET	8
NOTIFICATION REQUIREMENTS	9

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**SIGN VARIANCE APPLICATION**  
**OR**  
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REQUEST FOR:     SIGN VARIANCE                     SIGN SPECIAL USE PERMIT

PROPERTY ADDRESS/LOCATION: \_\_\_\_\_  
\_\_\_\_\_

CURRENT ZONING: \_\_\_\_\_

STATEMENT OF INTENT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LEGAL DESCRIPTION AND PLOT OF PROPERTY  
(ATTACH A SEPARATE SHEET IF NECESSARY)

TAX PARCEL NUMBER(S): \_\_\_\_\_  
(IF APPLICABLE)

APPLICANT(S) INFORMATION

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

MAILING ADDRESS: \_\_\_\_\_

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

PH. NUMBER: ( ) \_\_\_\_\_ FAX NUMBER: ( ) \_\_\_\_\_

PROPERTY OWNER(S) INFORMATION (IF DIFFERENT FROM APPLICANT):

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

MAILING ADDRESS: \_\_\_\_\_

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

PH. NUMBER: ( ) \_\_\_\_\_ FAX NUMBER: ( ) \_\_\_\_\_

ATTORNEY / REPRESENTATIVE INFORMATION

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

MAILING ADDRESS: \_\_\_\_\_

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

PH. NUMBER: ( ) \_\_\_\_\_ FAX NUMBER: ( ) \_\_\_\_\_

IT IS UNDERSTOOD AND AGREED BY THE APPLICANT THAT PERMISSION IS HEREBY GRANTED TO THE CITY, ITS REPRESENTATIVES AND OTHER RELEVANT AGENCIES FOR ACCESS TO SAID PROPERTY FOR INSPECTIONS, INVESTIGATIONS, AND EVALUATIONS FOR THE PURPOSE OF PREPARING STAFF REPORTS.

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

SIGNATURE(S)

APPLICANT(S)

PROPERTY OWNER(S) (IF DIFFERENT FROM APPLICANT)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Personally came and appeared before me, the undersigned authority ion and for the said county and state, on the \_\_\_\_ day of \_\_\_\_\_, 20 within my jurisdiction, the above named party(ies), who acknowledged that he/she executed the above and foregoing instrument as his/her voluntary act and deed and is authorized to do so.

\_\_\_\_\_  
NOTARY PUBLIC

My commission Expires:

\_\_\_\_\_

**INSTRUCTIONS AND GENERAL INFORMATION  
FOR FILING SIGN VARIANCE OR SIGN SPECIAL USE PERMIT**

ALL REQUESTS WITH SUPPORTING DOCUMENTS MUST BE FILED WITH THE BUILDING PERMIT OFFICE BY THE FILING DEADLINE (SEE ATTACHED SCHEDULE) IN ORDER TO BE HEARD BY THE MAYOR AND BOARD OF ALDERMEN. A MEETING WITH A REPRESENTATIVE OF THE BUILDING PERMIT OFFICE IS HIGHLY RECOMMENDED PRIOR TO FILING AN APPLICATION.

**CHECK LIST FOR COMPLETED APPLICATION PACKAGE:**

1. APPLICATION (COMPLETED, SIGNED AND NOTARIZED)
2. STATEMENT OF INTENT
3. ANY PREPARED STATEMENT THAT WILL BE GIVEN AT THE PUBLIC HEARING AND ALL EVIDENCE THAT IS TO BE PRESENTED AT THE PUBLIC HEARING
4. LOCATION MAP
5. COPY OF TAX MAP SHOWING PROPERTY BEING CONSIDERED FOR ACTION, AND PROPERTY WITH 160 FEET OF PROPERTY BEING CONSIDERED.
6. LIST OF PROPERTY OWNERS WITHIN 160 FEET OF PROPERTY BEING CONSIDERED FOR ACTION AND CERTIFIED MAIL RECEIPT SHOWING APPROPRIATE NOTICE OF THE PUBLIC HEARING
7. COPY OF LETTER OF NOTIFICATION TO BE PUBLISHED
8. APPLICATION FEE (\$300.00)

\*\*\*\*\*APPLICATION FEES ARE NOT REFUNDABLE\*\*\*\*\*  
\*\*\*\*\*

CONTACT THE BUILDING PERMIT OFFICE FOR MORE INFORMATION

PHONE: 601-939-4279

FAX: 601-420-3332

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**NOTIFICATION TO PROPERTY OWNERS**

**Property Owners within 160 Feet**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Parcel Number:  
\_\_\_\_\_

Request For:  SIGN VARIANCE  SIGN SPECIAL USE PERMIT  
(CHECK ALL THAT APPLY)

Property Address/Location: \_\_\_\_\_  
\_\_\_\_\_

Please Take Notice That \_\_\_\_\_  
Applicant(s) Name(s)

Has/Have filed an application on the subject property as shown above:

\_\_\_\_\_  
Signature

The applicant is seeking a Sign action requesting:

\_\_\_\_\_

Statement of Intent:  
\_\_\_\_\_  
\_\_\_\_\_

A PUBLIC HEARING WILL BE CONDUCTED ON: DATE: \_\_\_\_\_ TIME: 6:30 P.M.

PLACE: FLOWOOD CITY HALL, 2101 AIRPORT ROAD, FLOWOOD, MS  
OR ON A SUBSEQUENT DATE TO WHICH THE MATTER MAY BE CONTINUED. AS ONE OF  
THE OWNERS OF PROPERTY LOCATED WITHIN ONE HUNDRED SIXTY (160) FEET OF THE  
ABOVE DESCRIBED PROPERTY, YOU ARE REQUIRED TO BE NOTIFIED OF THE REQUEST.  
YOU HAVE THE RIGHT TO BE PRESENT AT THE HEARING AND TO MAKE ANY STATEMENT  
OR TO OFFER ANY EVIDENCE CONCERNING THE SUBJECT APPLICATION WHICH YOU MAY  
DEEM NECESSARY. FAILURE TO APPEAR AND PRESENT EVIDENCE MAY RESULT IN THE  
GRANTING OF THE REQUESTED ORDER. INFORMATION IS AVAILABLE AT THE BUILDING  
PERMIT OFFICE LOCATED AT THE FLOWOOD CITY HALL, 2101 AIRPORT ROAD, FLOWOOD,  
MISSISSIPPI OR PHONE 601-939-4279.

\_\_\_\_\_  
(APPLICANT)

\_\_\_\_\_  
(APPLICANT)



## NOTIFICATION REQUIREMENTS

**All property owners** within one hundred (160) feet radius of the subject property, excluding the width of the streets, must be notified concerning the request for zoning actions; indicating the time, date, and location of the public hearing before the Mayor and Board of Aldermen. Failure to notify all property owners will constitute invalid notice, and the application will be dismissed or postponed. Verification of property ownership within one hundred sixty (160) feet of the subject can be obtained from the Tax Rolls in the County Tax Assessor's Office, located at 211 East Government Street, Suite C, Brandon, Mississippi.

**Notification** to the property owners must be provided by certified letter, mailed to the property owners. A list bearing the names of all property owners within the stated area and a copy of each letter sent to the property owners by certified mail must be filed with the sign application. Also the certified postal receipt must be delivered to the Building Permit office prior to the public hearing.

**A legal advertisement** notifying the public of the proposed sign action must be prepared by the applicant. The applicant will be responsible to pick up the approved letter of publication and deliver to the Rankin Record located at 634 Grants Ferry Road, Flowood, Mississippi, and to pay all costs for the advertisement. The proof of publication must be filed with the Building Permit office prior to the day of the hearing.

**A sign** informing the public of the requested sign action will be placed on the property by the Building Permit office prior to the hearing. After a hearing has been held or a determination made, the sign may be removed from the subject property by the Building Permit office, or it may remain until the case is finalized, if necessary. If the sign is removed by the applicant before the hearing the action will constitute a withdrawal by the applicant, and the case will not be heard at the next scheduled hearing.

### **Appearance:**

The applicant or representative must appear before the Mayor and Board of aldermen during the public hearing for action to explain the request and answer any questions. All evidence to be presented to the Mayor and Board of Aldermen at the public hearing and any prepared statement must be submitted to the Building Permit office upon submitting the application. Both applicant and protestant may call individuals to speak on their behalf. Legal counsel is not required but may be in an applicant's best interest.

All data submitted becomes the property of the City as a part of the permanent file in the Building Permit office.

### **Withdrawals:**

A letter to the Building Permit office shall be sent if the application is withdrawn.