



City of Ocean Springs Planning Department
1018 Porter Avenue / PO Box 1800 Ocean Springs, MS 39564
(228) 875-4415

LEGAL NON-CONFORMING APPLICATION

Application Fees:

Legal Non-Conforming: \$50.00 + \$1.00

(\$1.00 fee is per Ordinance 2022-17 effective 11/2022 following the requirements of Section 25-60-5 MS Code Annotated)

Application Date: _____ (*Applications are due by the 7th of each month.*)

Applicant Information

Address of Lot(s): _____
Parcel ID(s): _____

- 1. Applicant: _____ Phone _____
Address _____ Email _____
- 2. Local Agent: _____ Phone _____
Address _____ Email _____
- 3. Owner of Record: _____ Phone _____
Address _____ Email _____
- 4. Engineer: _____ Phone _____
Address _____ Email _____
- 5. Land Surveyor: _____ Phone _____
Address _____ Email _____
- 6. Attorney: _____ Phone _____
Address _____ Email _____

Property Information

- 1. Tax Map Designation: Section _____ Township: _____ Range: _____
- 2. Zoning of Lot(s): _____
- 3. Current lot area (sq. ft.) _____

Reconfiguration Request

- 1. Describe the request (existing lot size, lot width, reason for request, etc.).

2. Has Zoning and Adjustments Board granted any variance exceptions or special permits for this property?
 _____ Yes _____ No If so, please explain and state the date of approval: _____
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-
3. Are there any easements filed for the property? _____
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4. Is there access to public water and sewer lines? _____

LEGAL NON-CONFORMING COMPLIANCE CHECKLIST

This checklist **to be completed by applicant** and verified by City Planning Department.

Submittal Requirements The following must be included for a complete application package:

- _____ Application
- _____ Application Fee
- _____ Vicinity map submitted, identifying lot(s) relationship to nearby parcels, roadways or other landmarks.
- _____ Survey submitted, including all required information (see survey requirements)
- _____ Evidence of ownership submitted (tax statement, deed, etc.)
- _____ If corporate ownership, attach a list of all directors, officers, stockholders of each corporation owning more than 5% of any class of stock.
- _____ Affidavit of Ownership and notarized signature submitted (attached)
- _____ Adequate legal and physical access to all proposed lots is provided (no “land locked” parcels)
- _____ Proposed development does not impair existing access, easements or public improvements.

Survey Requirements for Lot Split/Lot Reconfiguration

Information for Applicant, Items to be included in submittal:

- _____ Date, north arrow and scale
- _____ Parcel ID number(s)
- _____ Existing and proposed lot lines, lot widths, lot areas, and any other lot dimensions
- _____ Existing driveway(s), roads and road easements/rights-of-way
- _____ Existing utilities, including any septic tanks or other private utilities
- _____ All existing structures
- _____ Setbacks from existing structures to existing and proposed property lines
- _____ Location of any existing structures on the lots, with nature, location and dimensions
- _____ Any existing and proposed utility or road easements

Affidavit of Ownership

Attached hereto is an affidavit of ownership indicating the dates the respective holdings of land were acquired, together with the book and page of each conveyance into the present owner as recorded in the County Records of Deeds (Chancery Clerk) office. This affidavit shall indicate the legal ownership of the property, the contract owner of the property, and the date the contract of sale was executed.

I, (print name) _____, hereby certify that:

- 1. I am the owner of the property that is the subject of this application and that I have read and understand the requirements as outlined in the application.
- 2. There are no outstanding City of Ocean Springs property taxes or special assessments on the original parcel(s).

I further acknowledge that the information provided herein is true and correct to the best of my knowledge.

Owner(s) Name: _____

Parcel ID(s): _____

Date Property Acquired Date: _____

Book and Page of Each Conveyance: _____

Owner's Signature _____ Date _____

STATE OF _____

COUNTY OF _____

I _____, hereby depose and say that all the above statements and the statements contained in the papers submitted herewith are true.

Mailing Address _____

Subscribed and sworn before me this _____ day of _____.

My commission expires _____

Notary Signature