



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

**APPLICATION FOR A LICENSE TO ENCROACH  
CITY RIGHT OF WAY OR EASEMENT**

Application Date: \_\_\_\_\_

Address of Lot(s): \_\_\_\_\_  
Parcel ID(s): \_\_\_\_\_

**Applicant Information**

- Applicant: \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_
- Property Owner: \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_

**To the Mayor and Board of Aldermen of the City of Ocean Springs:**

The undersigned hereby makes application for a License to Encroach the above public right of way (R.O.W.)/Easement particularly described in Exhibit No. 1, attached.

In support of this application, the undersigned represents and warrants the following:

- The undersigned will hold the City of Ocean Springs harmless, and indemnify it against all suits, costs, expenses, and damages that may arise or grow out of such License to Encroach.
- EXHIBIT No. 1: Attached, marked Exhibit No. 1, are two copies of the metes and bounds description of that portion of the public R.O.W./easement sought to be encroached upon, prepared by a Surveyor.
- EXHIBIT No. 2: Attached, marked Exhibit No. 2, are two copies of a plat or detailed sketch of the public R.O.W./easement sought to be encroached upon and the surrounding areas to the nearest streets in all directions, showing the abutting lots and block, and the subdivision in which the above described public utility easement is situated together with the record owners of such lots.
- EXHIBIT No. 3: Attached, if applicable, marked Exhibit No. 3, is the consent of all public utilities known to be situated affected by the License to Encroach.
- EXHIBIT No. 4: Attached, marked Exhibit No. 4, is the consent of the City of Ocean Springs staff to the License to Encroach.
- A License to Encroach the public R.O.W./easement should be granted because:

7. Such public easement has been used, is being used, or is requested to be used as follows:

All of the information contained in this application is true and correct to the best of my knowledge and belief.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**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

**Application for License to Encroach R.O.W/Easement**

Located: \_\_\_\_\_

**EXHIBIT No. 3** *(use when applicable)*

The undersigned public utilities companies, using that portion of the public utility easement sought to be encroached upon in the Application for License to Encroach above referred to, do hereby consent to the encroachment of the described portion thereof.

Utility Company Name: \_\_\_\_\_

Utility Designee Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Utility Company Name: \_\_\_\_\_

Utility Designee Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Utility Company Name: \_\_\_\_\_

Utility Designee Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Utility Company Name: \_\_\_\_\_

Utility Designee Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

