



City of Ocean Springs Planning Department

1018 Porter Avenue / PO Box 1800 Ocean Springs, MS 39564

(228) 875-4415

**APPEAL**  
**PLANNING COMMISSION DETERMINATION**

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*Appeals of any determination made by the Planning Commission are heard in a Public Meeting  
by the Board of Aldermen (BOA).*

Date of Planning Commission determination: \_\_\_\_\_

**SUBJECT PROPERTY ADDRESS:** \_\_\_\_\_

Current Property Zoning Classification: \_\_\_\_\_

**Applicant Information:**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**Property Owner Information (if different):**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

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**NOTE:** *The date of the public hearing will be set based on the date this application is received.*

**REQUEST SUMMARY:**

**\*\*ATTACH ADDITIONAL INFORMATION IF APPLICABLE.**

**IS THERE ANY ADDITIONAL INFORMATION SUBMITTED WITH THIS APPEAL APPLICATION  
THAT WAS NOT INCLUDED IN THE ORIGINAL REQUEST?**      YES ☐      NO ☐

If yes, please describe:

**PROPERTY OWNER:**

**APPLICANT (if different):**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name – Property Owner

\_\_\_\_\_  
Printed Name – Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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