



City of Ocean Springs Planning Department

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

(228) 875-4415

VARIANCE REQUEST APPLICATION

Submittal Requirements:

- *Application*
- *Fee of \$50.00 must be paid at the time application is submitted.*
 - *\$1.00 additional fee (per Ordinance 2022-17 following the requirements of Section 25-60-5 MS Code Annotated)*
- *Site Plan (or Survey) showing requested variance, with dimensions.*

Date: _____

Name of Applicant: _____

Address: _____

Phone No. _____ Email Address: _____

.....
Parcel Identification Number: _____

Property Owner (if different from Applicant): _____

Property Location for the Variance: _____

Type of Variance(s) Requested (setback, height, zoning extension, parking, etc.)

The purpose of this variance is to consider an application to allow:

Provide justification of the variance request. Justification must include exceptional narrowness, shallowness, shape of a specific piece of property, exceptional topographical conditions, or other extraordinary situation or condition for a specific piece of property.

Applicant Signature: _____ **Date:** _____