

**JACKSON COUNTY PLANNING DEPARTMENT**  
**2915 Canty Street, Suite Q**  
**Pascagoula, Mississippi 39567**  
**(228) 769-3406**

***HOME OCCUPATION***

**Number:** \_\_\_\_\_ **Review Date:** \_\_\_\_\_

**Name of Applicant\*** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Name of Property Owner** \_\_\_\_\_

**Mailing Address of Applicant** \_\_\_\_\_

**Address of site, if applicable** \_\_\_\_\_

**Reason for request and intended use of property** \_\_\_\_\_

\_\_\_\_\_

**ATTACHMENTS REQUIRED:**

- \_\_\_\_\_ **Diagram of intended use, showing dimensions and distances of property, building, and their setbacks, parking spaces, entrances and exits.**
- \_\_\_\_\_ **Legal descriptions (Proof of Ownership by way of a Warranty Deed or Deed of Trust),**
- \_\_\_\_\_ **Application Fee. Amount \$25.00.**
- \_\_\_\_\_ **Copies of approvals or requests of approval from other agencies, such as: Health Department, Miss Air and Water Pollution Control Commission, Corps of Engineers, Miss Marine Resources Council, etc.**
- \* \_\_\_\_\_ **Signed lease or purchase agreement if applicant is not the property owner.**

**COMPLETE THE FOLLOWING:**

- A. Explain present use of property and condition of any existing structures:** \_\_\_\_\_  
\_\_\_\_\_
- B. What are past uses?** \_\_\_\_\_  
\_\_\_\_\_
- C. List use of adjoining properties: (Ex. Residence, Mobile Home, Commercial, Vacant, Etc.)**  
**NORTH** \_\_\_\_\_ **EAST** \_\_\_\_\_  
**SOUTH** \_\_\_\_\_ **WEST** \_\_\_\_\_
- D. What is the elevation of property?** \_\_\_\_\_
- E. What is the elevation above mean sea level of existing or proposed buildings?** \_\_\_\_\_
- F. Will there be any discharge of air, liquid or solids?** \_\_\_\_\_ **Explain** \_\_\_\_\_  
\_\_\_\_\_

***ALL OF THE ABOVE INFORMATION MUST BE COMPLETE, WITH ATTACHMENTS AND FEES, IN ORDER FOR THE APPLICATION TO BE ACCEPTED AND PROCESSED! ADJACENT PROPERTY OWNERS WILL BE NOTIFIED BY THE PLANNING DEPARTMENT STAFF.***

**Signature of Applicant** \_\_\_\_\_

**Date** \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
<b>Zoning Classification</b> _____	<b>Attested by</b> _____
<b>Date Received</b> _____	<b>Verify as Complete</b> _____
<b>Fee Amount Received</b> _____	<b>Initials</b> _____