

REQUEST FOR LANDSCAPE WAIVER
City of Starkville Planning & Zoning Commission
City Hall, 110 West Main Street
Starkville, Mississippi 39759-2823
Phone: (662) 323-8012 Fax: (662) 323-4143
e-mail: buildingdept@cityofstarkville.org



APPLICANT / AGENT INFORMATION

Name: _____ Phone: _____
E-mail address: _____

PROPERTY OWNER INFORMATION

Name: _____ Phone: _____
Address: _____
E-mail address: _____

If different from applicant, please attach [notarized letter of authorization](#).

PROPERTY INFORMATION

Street Address/Location: _____
Tax Map/Parcel ID Number: _____ Zoning: _____
Requesting Waiver From:

For submittal deadline please refer to Tree Advisory Board schedule.

Application Fee Drawings [Notarized Owner Authorization](#)

Submitted by: _____ Date: _____