

**SPECIAL AND USE EXCEPTION  
APPLICATION**

City of Starkville

110 West Main Street

Starkville, MS 39759

Ph:662.323.2525

Email: buildingdept@cityofstarkville.org



**APPLICANT'S INFORMATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Email: \_\_\_\_\_

Address: \_\_\_\_\_

**PROPERTY OWNER'S INFORMATION (IF NOT APPLICANT)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

**PROPERTY INFORMATION**

Property Address: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ Current Zone District: \_\_\_\_\_

**PROJECT INFORMATION**

Project Name: \_\_\_\_\_

Proposed Use:

Residential

Commercial

Mixed Use

Institutional

Industrial

Other

If Commercial, Proposed Number of Units: \_\_\_\_\_

If Residential, Proposed Number of Dwelling Units: \_\_\_\_\_

If Multi-Unit Residential, Proposed Number of Bedrooms: \_\_\_\_\_

Project Description: \_\_\_\_\_

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

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

Property Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ *(required if not applicant)*