

ADMISTRATIVE APPEAL 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: _____

Name: _____

Email: _____

Address: _____

PROPERTY OWNER'S INFORMATION (IF NOT APPLICANT)

Name: _____ Phone: _____

Email: _____

Address: _____

PROPERTY INFORMATION

Project Name: _____

Property Address: _____

Parcel Number: _____ Current Zone District: _____

APPEAL INFORMATION

Reason for the Appeal?

Applicant's
Signature: _____
Date: _____

Property Owner's
Signature: _____
Date: _____
(required if not applicant)