

**DEVELOPMENT REVIEW APPLICATION**  
City of Starkville Development Review Committee  
City Hall, 110 West Main Street  
Starkville, Mississippi 39759-2823  
Phone: (662) 323-2525 Fax: (662) 323-4143  
e-mail: [buildingdept@cityofstarkville.org](mailto:buildingdept@cityofstarkville.org)



**APPLICANT 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](#).*

**PROJECT INFORMATION**

Name of Project or Plat: \_\_\_\_\_  
Street Address/Location: \_\_\_\_\_  
Parcel ID Number: \_\_\_\_\_ Zoning: \_\_\_\_\_  
Engineer/Surveyor/Architect of Record: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Please Circle Type of Review Requested:  SITE PLAN  PRELIMINARY PLAT  FINAL PLAT

Briefly describe project:

Is this submittal related to a public hearing request?  Yes  No

If yes, please reference the public hearing item number(s): \_\_\_\_\_

*Submittal deadline is Tuesday for review by the Development Review Committee the following Thursday.  
Checklists can be found on the City of Starkville's website or in the Building Department.*

[Application Fee](#)  2 Printed Sets of Plans  1 PDF Set of Plans

[Completed Checklist](#)  [Notarized Owner Authorization](#)

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_