

CITY OF OXFORD, MISSISSIPPI PROPERTY LINE/STAKING VERIFICATION APPLICATION

Project Name	
Name of Property Owner	
Physical Address of Site	
PPIN(s) #	
Applicant's Address	
Applicant's Phone #	Email Address
Contractor Name	Phone #
Engineer/Surveyor for Staking	
License #	Engineer/Surveyor Phone #
Current Zoning	Conservation Overlay District: Y or N Historic District: Y or N
SETBACKS: (Completed by Applicant)	VERIFICATION BY INSPECTOR:
Front Build-to Line Min/Max	Front Build-to Line Min/Max
Side Setback	Side Setback
Rear Setback	Rear Setback
	Building Footprint Compliance: PASS or FAIL
DATE OF INSPECTION	<u> </u>
ZONING INSPECTOR SIGNATURE	DATE