



# Certificate of Appropriateness

City of Biloxi Department of Community Development

**Mailing Address: P.O. Box 508, Biloxi, MS 39530**

Office Location: 676 Dr. MLK Blvd.,

Building (228) 435-6270 Planning (228) 435-6266 Fax (228) 435-6188

TO BE COMPLETED BY APPLICANT	Ward: _____	DATE: _____
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AHRC Case No.: -

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

Tax Parcel Number:

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

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Zoning Classification: \_\_\_\_\_

Property Size: \_\_\_\_\_

Address of Property to be reviewed

Name of Rightful Owner (Please Print)

Name of Applicant, if different from owner

Address, if different from above

Address

( ) ( )

( ) ( )

Home Phone Office Phone

Home Phone Office Phone

**HISTORIC DISTRICT/PROPERTY:**

- |   |   |          |
|---|---|----------|
| <input type="checkbox"/> West Central Historical District | <input type="checkbox"/> Downtown Historical District       | N- _____ |
| <input type="checkbox"/> Point Cadet Historical District  | <input type="checkbox"/> West Beach Historical District     | S- _____ |
| <input type="checkbox"/> East Central Historical District | <input type="checkbox"/> Edgewater Park Historical District | E- _____ |
| <input type="checkbox"/> Other (please specify):          |   | W- _____ |

**MATERIALS REQUIRED FOR CASE REVIEW\*:**

- Photographs  Renderings  Color Samples  Sample Materials  Sign Depictions
- Site Plans (Including elevations\*\*)  Landscaping Plans Property size \_\_\_\_\_

\* All materials must be submitted before an application will be considered.

\*\* Exterior elevations, drawn to scale, which depict the proposed construction. Perspective renderings or isometric drawings are encouraged to communicate complicated projects.

**WORK PROPOSED:**

- Erect  Replace  Alter  Repair  Addition to  Demolish  Other \_\_\_\_\_

Describe nature of the work to be reviewed (please describe in as much detail as possible the project you are proposing. \_\_\_\_\_

*Application is hereby made for a Certificate of Appropriateness for a building, structure, or premises as identified and described within this application. I agree to comply with all the laws, ordinances, and regulations enforced by the City of Biloxi Community Development Department in pursuit of this Certificate.*

Signature of Rightful Owner

Signature of Applicant

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Mailing Address (if different)

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Mailing Address (if different)

If someone other than the applicant needs to be notified concerning this case, please note name(s) and address (es) below:

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

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

Application Received by: \_\_\_\_\_

By receiving this application, staff verifies the completeness of the application.

Approved as submitted

Approved with conditions (see notes below)

Disapproved

REMARKS: \_\_\_\_\_

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**ARCHITECTURAL AND HISTORICAL REVIEW COMMISSION**

The purpose of the Architectural and Historical Review Commission (AHRC) is to ensure the provision of functional, safe, **innovative and attractive site development compatible with the City's manmade and unique** natural environment, and to protect against developments within certain more sensitive areas of the City which may degrade and or depreciate the image, beauty and character of the City. The AHRC recognizes that such adverse impacts affect the livelihood of the community in general and the surrounding neighborhoods in particular.

Regularly scheduled AHRC meetings are held at 8:30 a.m. on the second and fourth Thursday of each month, when applications have been presented for review. The applicant or interested parties may contact the Planning Division office at (228) 435-6266 subsequent to the meeting at which any final decision is made, as indicated herein, and will be advised of any action taken by the AHRC regarding a specific case.

All projects or developments involving moving or removal of a structure, demolition, exterior improvements to existing structures or any new construction located within an Architectural Review District, Historic District or Neighborhood Heritage District, as identified within the City of Biloxi's Architectural Review Ordinance, must be submitted to the Architectural and Historical Review Commission for approval. Copies of the Architectural and Historical Review Ordinance may be obtained through the Planning Division Office.

Please note that AHRC approval does not waive any permits or licenses required by the city, county or state. It is the applicant's responsibility to obtain any and all necessary permits for work performed.

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**APPEALS**

Applicants or interested parties which are aggrieved with the decision of the ARHC have ten (10) calendar days after the AHRC takes action in which to advise the Clerk of the City Council, in writing, that they are aggrieved with the decision of the AHRC and have elected to appeal a decision of that body to the City Council. This notification will place the matter on the agenda of the City Council, as per Section 2-8-16 of the Code of Ordinances of the City of Biloxi.

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**TREE PERMIT**

Tree permits are required before the removal or trimming of any protected **tree, in accordance with the City of Biloxi's Land Development Ordinance**. The Land Development Ordinance is available here <http://www.biloxi.ms.us/resources/code-of-ordinances/>.