



# CITY OF FOREST

105 East 1<sup>st</sup> Street  
P. O. BOX 298  
FOREST, MISSISSIPPI 39074

NANCY N. CHAMBERS  
MAYOR

## City of Forest Planning Application

### Company Information

Applicant is the  Owner  Lessee  Other: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

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

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

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Person Responsible for Property/Building Maintenance/Landscaping: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Signature: \_\_\_\_\_

Note: Business Plan must be in writing and attached to application.

I hereby grant permission for the City of Forest Building Department and Fire Department to enter the property described above for the purpose of a building inspection as related to all International Property Maintenance Codes and Fire Codes. I also am aware that the City of Forest will provide garbage services, provided that the garbage produced does not exceed two (2), thirty (30) gallon **APPROVED** garbage cans (with lids). If the amount(s) exceeds the allowable limit, the owners/lessee must provide an **APPROVED** dumpster that is **NOT** visible from any highway or city street.

\_\_\_\_\_  
Signature of Owner/Lessee Date

FAYE JOHNSTON – City Clerk, Tax Collector  
TELEPHONE (601) 469-2251 FAX (601) 469-3224

**- ALDERMEN -**

YOLANDA WHITE

LYNN ATKISON

HARRY ROBINSON

CYNTHIA SLAUGHTER MELTON

MATT ALFORD

# Business Plan

Hours of Operation \_\_\_\_\_ to \_\_\_\_\_  
Days of Operation \_\_\_\_\_ to \_\_\_\_\_

**\*\* FOR OFFICE USE ONLY\*\***

Date Received: \_\_\_\_\_ Received: \_\_\_\_\_  
Date to Appear to Planning Commission: \_\_\_\_\_  
Planning Commission  Approved  Denied

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