CITY OF JACKSON
HISTORIC PRESERVATION COMMISSION
COMPLIANCE AGREEMENT

(Revised 11/13/19)

Fee: $15: business check, certified check, money order, or cash

DATE: __________________ ADDRESS OF PROPERTY ___________________________________________

PARCEL NO: __________________ DISTRICT __________________ ZONED __________________

PROPERTY OWNER(S): ________________________________________________________________

COMPLETE MAILING ADDRESS: ______________________________________________________

PHONE: __________________ CELL PHONE: __________________ E-MAIL: __________________

By virtue of my signature below, I hereby certify that the building permit I am applying for involves

Only the following type of work:

1. ______ Interior Work

2. ______ Exterior Painting – no changes to design or materials and no painting on the unpainted masonry

3. Or /and the following type of maintenance or repair work which does not involve a change in design, material, or other appearance thereof:

   ______ Reroofing

   ______ Foundation Repair work

4. ______ Other – Describe below:

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

I, (we), the undersigned owners understand that any exterior work to this structure beyond the scope of the above, may require an approved Certificate of Appropriateness issued by either the City of Jackson Historic Preservation Staff of the Historic Preservation Commission.

I, (we), further understand the unapproved work on this structure or work beyond the scope of this Building Permit may be subject to a $1,000 per day fine, subject to due process.

I, (we), further understand that other permits and or variances required to complete this project are our responsibility and agree to pursue these in a timely manner.

WITNESS THE SIGNATURE(S) of the owner(s) of the subject property located at:

______________________________  ____________________
Street Address  Zip Code

On this the __________________ day of __________________, 20______.
STATE OF MISSISSIPPI  
COUNTY OF HINDS

Personally came and appeared before me, the within named:

Who signed and delivered the above and foregoing instrument as and for their free act and deed on the day and year therein mentioned, and who acknowledge to me that they are the owner(s) of the subject property as described in this City of Jackson Historic Preservation Commission Compliance Agreement.

GIVEN UNDER MY HAND AND OFFICIAL SEAL OF OFFICE, this the _____ day of ______________

, 20_____.

________________________________________________________

NOTARY PUBLIC

MY COMMISSION EXPIRES: (Official Seal)

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Reviewed and Approved:

__________________________  

Date_____________________

Staff to Historic Preservation Commission