

APPLICATION FOR STANDARD LEASE

OF PUBLIC TRUST TIDELANDS

**SECRETARY OF STATE**  
Public Lands Division  
Post Office Box 97  
Gulfport MS 39502-0097

No. \_\_\_\_\_

**1. APPLICATION BY:**

\_\_\_\_ Individual \_\_\_\_ Partnership \_\_\_\_ Corporation \_\_\_\_ Public Agency

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

Address  
\_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Business Other

**2. APPLICANT'S ATTORNEY AND/OR AUTHORIZED AGENT (if any)**

Name  
\_\_\_\_\_

Address  
\_\_\_\_\_  
\_\_\_\_\_

Telephone ( ) \_\_\_\_\_

3. **GEOGRAPHIC LOCATION OF SUBMERGED LAND:** (Attach vicinity map - preferably a reproduction of appropriate portion of current United States Geological Survey Quadrangle Map)

Section\_\_\_\_\_ Township\_\_\_\_\_ Range\_\_\_\_\_  
County\_\_\_\_\_

Nearest \_\_\_\_\_ City/Community \_\_\_\_\_

Name of Waterbody \_\_\_\_\_

Estimated area of project (square feet) \_\_\_\_\_

4. **USE OF TIDELANDS:**

\_\_\_\_Commercial \_\_\_\_Private \_\_\_\_Industrial \_\_\_\_Public

\_\_\_\_Residential \_\_\_\_Other (explain)\_\_\_\_\_

\_\_\_\_Recreational

5. **CONSTRUCTION OF PROPOSED IMPROVEMENTS:**

\_\_\_\_New \_\_\_\_Renovation/Expansion

\_\_\_\_Boat Slip Length\_\_\_\_\_ Width\_\_\_\_\_ Depth\_\_\_\_\_

\_\_\_\_Marina Length\_\_\_\_\_ Width\_\_\_\_\_ Depth\_\_\_\_\_

\_\_\_\_Wharf-Pier Length\_\_\_\_\_ Width\_\_\_\_\_ Depth\_\_\_\_\_

\_\_\_\_Docking Length\_\_\_\_\_ Width\_\_\_\_\_ Depth\_\_\_\_\_

\_\_\_\_Other (explain) \_\_\_\_\_

**6. PROJECT SCHEDULE:**

Proposed start date \_\_\_\_\_

Proposed completion date \_\_\_\_\_

Estimated cost of project \_\_\_\_\_

**7. RIPARIAN OWNERSHIP:** (Attach true copy of evidence of title for upland riparian property or, if applicable, notarized assignment and assignor's evidence of title)

Upland Riparian Owner (if different from applicant):

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Business Other

**8. LOCATION OF RIPARIAN PROPERTY:**

Subdivision, Block and Lot Number \_\_\_\_\_

Assessor's Parcel No. \_\_\_\_\_ Size (square feet) \_\_\_\_\_

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

Will tidelands project necessitate change in present upland zoning classification? \_\_\_\_\_ If yes, please list any rezoning change(s), \_\_\_\_\_ indicating \_\_\_\_\_ status \_\_\_\_\_ of \_\_\_\_\_ approval.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Improvements on upland riparian parcel (describe) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Value of upland riparian parcel as listed on County Tax

Assessor's roll \_\_\_\_\_

9. DESCRIBE ALL ACTIVITIES TO BE CONDUCTED ON THE LEASED PROPERTY.

---

---

---

---

If the property to be leased is to be used for any purpose other than single family residential property, attach two (2) prints of a survey prepared, signed and sealed by a person properly registered as a land surveyor by the Mississippi State Board of Registration for Professional Engineers and Land Surveyors with the following requirements:

- (1) Utilizing an appropriate scale on 8½" x 11" size paper, unless a larger size is necessary to provide sufficient clarity and detail;
- (2) Showing the line of mean high tide, if any;
- (3) Showing the location of shoreline and submerged vegetation, if any;
- (4) Showing the location of any proposed structures and all existing structures, if any;
- (5) Showing the applicant's or assignor's upland parcel property lines, if property to be leased abuts on property which is outside the public trust;
- (6) Showing the primary navigation channels or direction to the center of the affected waterbody; and
- (7) Including a legal description of area to be leased with State Plane coordinates of reference point.

If the property to be leased is to be used as a single family residential property, attach two (2) copies of dimensioned site plan drawing(s) with the following requirements:

- (1) Utilizing an appropriate scale on 8½" x 11" size paper;
- (2) Showing the approximate water's edge;
- (3) Showing the location of shoreline vegetation, if any;
- (4) Showing the location of the existing structures and proposed structures, if any;
- (5) Showing the applicant's upland parcel property lines, if property to be leased abuts on property which is outside the public trust;
- (6) Showing the primary navigation channels or direction to the center of the affected waterbody; and
- (7) Including a legal description of area to be leased.

**10. LIST ALL APPROVALS OR CERTIFICATIONS RECEIVED OR APPLIED FOR FROM FEDERAL, STATE OR LOCAL AGENCIES FOR ANY STRUCTURES, CONSTRUCTION, OR OTHER ACTIVITIES DESCRIBED IN THIS APPLICATION.**

<u>AGENCY</u>	<u>TYPE APPROVAL</u>	<u>APPLICATION NUMBER</u>	<u>APPROVAL DATE</u>
U.S. Army Corps of Engineers	_____	_____	_____
Bureau of Marine Resources	_____	_____	_____
Bureau of Pollution Control	_____	_____	_____
City/County	_____	_____	_____
Other	_____	_____	_____
Explanation, if applicable:	_____		

---

**NOTE: ANY OF THE APPROVALS OBTAINED MUST BE SUBMITTED AS AN ATTACHMENT TO THIS APPLICATION ALONG WITH DETAILED PLAN OR PLOT OF LEASED AREAS, VICINITY MAPS, OWNERSHIP MAPS, STRUCTURAL PLANS OR CONSTRUCTION BLUEPRINTS.**

11. ATTACH SATISFACTORY EVIDENCE OF OCCUPANCY AND PAYMENT OF TAXES BY THE APPLICANT AND/OR HIS PREDECESSOR IN INTEREST PRIOR TO JULY 1, 1973, IF APPLICABLE, OR A STATEMENT ACKNOWLEDGING OCCUPANCY OF THE PROPERTY COMMENCED ON OR AFTER JULY 1, 1973.

12. TERM OF LEASE:

Request the lease be granted for \_\_\_\_\_ years with the option to renew for \_\_\_\_\_ years upon expiration of the primary term.

13. PUBLIC ACCESS

\_\_\_\_\_ ALLOWED                      \_\_\_\_\_ NOT ALLOWED

If public access is allowed, please describe extent of available public access and all barriers or hindrances thereto.

\_\_\_\_\_

---

---

---

If public access is not allowed, please state reasons for restriction.

\_\_\_\_\_

---

---

---

If the facility includes a marina, will at least 50% of berths be available for use by members of the general public at the same rates charged other customers and/or members?

Yes (\_\_\_)      No (\_\_\_)

14. SIGNATURE AND CERTIFICATION:

All statements contained above and attached exhibits are true and correct to the best of my knowledge and belief. I agree to

provide any additional data or information which may be required or requested by the Secretary of State's Office.

I enclose a non-refundable application processing fee in the amount of:

(\_\_\_) **\$50.00** for single family residential use

(\_\_\_) **\$150.00** for all other uses

\_\_\_\_\_  
Signature of Applicant or Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title