## **BOARD OF SUPERVISORS**

Madison County, Mississippi

E-911 Administration Office

1633 W. Peace Street, PO Box 608, Canton, MS 39046 T: (601) 859-4188 F: (601) 859-4743

Date: February 11, 2019

To: Madison County Board of Supervisors

From: E911 Administration

Re: Naming of Road(s)

Hanks Trail (PRVT)

Our office received and application from Cole Terrell petitioning a private road name. The requested private road is located off Livingston Vernon Rd. in Flora, Mississippi, with starting coordinates of 32.589746 -90.282605 and continues south for approximately 1763ft., terminating coordinates of 32.58491 -90.28253. Attached is a map showing description of proposed road, along with the application.

Upon verification of property ownership, it is our office's recommendation to accept to road name of Hanks Trail as a private road and add into the 911 system.

125 West North Street, Room 203 \*PO Box 608, Canton, MS 39046\* T: (601) 859-6485 F: (601) 859-4743

## APPLICATION FOR ROAD NAME ASSIGNMENT

## PROCEDURE:

- 1. Select a name for your road/ street
- 2. Contact the E-911 Office to check if the name you have selected is duplicated elsewhere in the county.
- 3. Fill out Application and Request of Petition COMPLETELY. Along with required paperwork, a letter of justification for request must be submitted.
- 4. ALL residents and property owners on the road/ street must sign the Request of Petition and list their telephone number and address. Please list ONLY one name and signature per property owner. If a residence is being leased or rented, the property owner must sign.
- 5. You must provide directions to the road with mileages and land marks to include the nearest addresses.
- 6. After all required paperwork is COMPLETED, submit to E-911 Office and the request will be presented to the Board of Supervisors at the next schedule Board Meeting for approval.
- 7. If the road/ street name is approved, the E-911 Office will assign specific addresses for the new road/ street name.
- 8. You will be notified status of application by mail at address given below.

APPLICATION:
Name, address, and telephone number of individual making request (This individual will be point of contact if more information is required):  [1] Terrell 128-219-6535, 100 Masen (1, Madison, MS 3911)
Show whether the road/ street is to be a PUBLIC or PRIVATE road by checking one of the following PUBLIC PRIVATE
Directions to proposed road/ street:
See attached map
Signature: Date: 2/11/19

## REQUEST OF PETITION FOR ROAD NAME ASSIGNMENT

WE, the owners and residents of a named road located in Section 34, Township 9N, Range 1W, in Madison County request that our road/street name be changed or assigned

a name. The persons now living on this road and the property owners have signed below indicating their approval of the name requested. WE understand that the name chosen

Dear Sirs:

cannot be a duplicated or a closely related name us is a detailed letter of justification for the name cha COURT ORDER will also be attached <u>if</u> applica subdivision.	nge/assignment request. A copy of a	
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ROAD/ STREET NAME CHOSEN:	STRAIL	
Type or Print Name  100 Mason Cove Madison MS  Address	Bruce Chapt	
Type or Print Name	Type or Print Name  2392 Vinlilia Rd. Canton  Address  601-879-3412  Telephone Number  Bure Crofit	11.
Address	237 L Vinlilia Rd. Can los	1.195
	601-879-3412	- 1-
228 - 219 - 6535 Telephone, Number	Telephone Number	
at It	12 me Croft	
Signature	Signature	
Type or Print Name	Type or Print Name	
Type of Filmt Name	Type of Time Name	
Address	Address	
Telephone Number	Telephone Number	
Signature	Signature	
u u		
Type or Print Name	Type or Print Name	
Address	Address	
Telephone Number	Telephone Number	
Signature	Signature	

<sup>\*</sup>Please make a copy of this page if more signatures are required for your petition\*

