



Marshall County Industrial
Development Authority
520 J. M. Ash Dr.
Holly Springs MS 38635
662-252-3916

CHICKASAW TRAIL INDUSTRIAL PARK SITE DEVELOPMENT PACKAGE

The Chickasaw Trail Industrial Park is managed by the Marshall County Industrial Development Authority (MCIDA) through its Chickasaw Trail Management Committee.

This package of information has been assembled to help new industrial/commercial tenants in the Park efficiently arrange for permits, utilities and other services that their facilities require before occupancy.

The contents of this package include:

- Requirements for approval of facilities by Chickasaw Trail Management Committee
- Zoning Office requirements for building permit and inspections during construction
- Electrical Service
- Natural Gas Service
- Potable Water Service
- Wastewater Service
- Other Services



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The Marshall County Industrial Development Authority has adopted "Protective Covenants" that all industrial/commercial facilities located within the Park must abide by. The Chickasaw Trail Management Committee is charged with the responsibility of reviewing and approving plans for new facilities built within the Park. No Building Permit will be issued prior to this review and approval.

Management Committee:

Committee Members: Del Stover, Chairman & Contact Person (662) 252-0646
Dot Childress
Bill Dawson
Rodney Whaley
Bill York
Conway Moore, Zoning Officer

Location: MCIDA Building, 520 J. M. Ash Drive
Holly Springs, MS 38635 Phone: (662) 252-3916

Management Committee Requirements:

1. Name of Owner of Facility and Engineer/Architect
2. Location of Facility including acreage of site and square footage of building(s)
3. Plans (drawings/sketches) of building(s), driveways, parking, landscaping, etc.
4. Building materials to be used
5. Other pertinent information relating to requirements of Protective Covenants

The Management Committee review can be scheduled within one (1) week or less of a request from the Owner/Contractor. The review is normally conducted at the MCIDA Office in Holly Springs. If changes are required by the Committee, the owner may schedule a follow-up review with the Chairman and will be scheduled as expeditiously as possible (within days of request by Owner/Contractor).

Following the "Approval" of the planned facility by the Committee, the Zoning Office can be contacted for a Building Permit.

Note: A copy of the Protective Covenants can be downloaded from the marshallcoms.com website (click on the Chickasaw Trails Industrial Park page).



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Zoning and Permits:

Location: 590 Hwy 178E
Holly Springs, MS 38635
Phone: (662) 252-3663

Contact: Conway Moore, Zoning Officer

The prerequisite for obtaining a Building Permit from the Zoning Office is "Approval of the Facility(s) plan by the Chickasaw Trail Management Committee.

Application for Building Permit:

1. Information required by Zoning Officer:

- Proof of ownership of land (Copy of Warranty Deed)
- Contractor License No. (*MS law requires a licensed Contractor for any facility with a total cost of \$100,000 or more*)
- 911 Address (*Can be obtained from 911 office at the Justice Center at 819 West Street in Holly Springs, based on approved drawing of facility*)

2. Fees:

- Building Permit Fee is Formula based on square footage of building.
- Inspection Fees are \$60 per inspection. (*number & type dependent on design of facility. There may be some inspections outside the expertise of the Zoning Office - if so, such inspections will be outsourced to qualified inspectors*)

3. Occupancy - the final inspection is in effect the occupancy permit.

Note: Applicable Codes for Buildings, Plumbing, Electrical, Mechanical, Gas, Flammable Liquids, can be found in the Protective Covenants. Covenants available on the *marshallcoms.com* website.



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Electrical Permit Application
Marshall County
590 Hwy 178 E.
Holly Spring MS 38635
(662) 252-3663

Check# _____ Cash _____

Contractor: _____ License # _____

Address: _____ Phone # _____

Job Site (Owner) _____ Phone # _____

Job Site (Address) _____

Subdivision: _____ Lot # _____

Commercial/Industrial: _____ Other: _____

I, the undersigned, certify that the described work listed on this permit is true and correct. I acknowledge that any permit granted on the representation herein made may be revoked at any time, without notice, on a breach of representation of violation of the electrical codes.

Contractor Signature: _____ Date: _____

Property owner certification: I the undersigned do hereby certify that I will be performing the described work listed on this permit application and will not be hiring anyone else to perform said work. I am award that I can be fined \$500.00 if I allow anyone else to perform this work.

Owners Signature: _____ Date: _____

1. Residential:

A. New Service Amps _____ X \$0.50 _____

B. Additions/Renovations _____

1.. Service Apps Added _____ X \$0.50 _____

2. Each Added Circuit _____ X \$10.00 _____

3. Add to Existing Circuit _____ \$25.00 _____

2. Commercial!Industrial

A. New Service Amps _____ X \$1.00 _____

B. Additions!Renovations _____

1. Service Apps Added _____ X \$1.00 _____

2. Each Added Circuit _____ X \$20.00 _____

3. Add to Existing Circuit _____ \$50.00 _____

3. Swimming Pools:

A. Private _____ \$100.00 _____

B. Public _____ \$150.00 _____

4. Re-inspection fees (first inspection included in permit fee
second (re-inspection) of same type and each succeeding
inspection of the same type

\$25.00 _____

Total fees _____



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Mechanical Permit Application
 Marshall County
 590 Hwy 178 E.
 Holly Spring MS 3863S
 (662) 252-3663

Check# _____ Cash _____

Contractor: _____ License # _____

Address: _____ Phone # _____

Job Site (Owner) _____ Phone # _____

Job Site (Address) _____

Subdivision: _____ Lot # _____

Residential: _____ Addition: _____ Commercial/Industrial: _____ Other: _____

I, the undersigned, certify that the described work listed on this permit is true and correct. I acknowledge that any permit granted on the representation herein made may be revoked at any time, without notice, on a breach of representation of violation of the electrical codes.

Contractor Signature: _____ Date: _____

Property owner certification: I the undersigned do hereby certify that I will be performing the described work listed on this permit application and will not be hiring anyone else to perform said work. I am award that I can be fined \$500.00 if I allow anyone else to perform this work.

Owners Signature: _____ Date: _____

- 1. Residential:
 - A. New \$30.00 Base + \$4.00 per Ton _____ Tons _____
 - B. Replacement - \$35.00 Flat Fee _____
- 2. Commercial/Industrial

	New/Replacements		
	\$Valuation		

(\$40.00 for the first \$1,000,000 value + \$4.00 for each addition \$1,000.00 value or fraction)
- 3. Other

	\$ Valuation:		
A. Boilers	_____		
B. Refrigeration	_____		
C. Vent Hoods	_____		
D. Duct Work (only)	_____		
E. Hot Water Heater	_____		
F. Misc.	_____		

(\$40.00 for the first \$1,000,000 value + \$4.00 for each addition \$1,000.00 value or fraction)
- 4. Gas Piping Only \$40.00 Flat Fee _____
- 5. Re-inspecting Fee _____

Re-inspection fee (first inspection included in permit fee -- second (re-inspection) of same type and each succeeding inspection of the same type \$100.00

Total Fees Due _____



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Plumbing Permit Application
 Marshall County
 590 Hwy 178 E.
 Holly Spring MS 3863S
 (662) 252-3663

Check# _____ Cash _____

Contractor: _____ License # _____

Address: _____ Phone # _____

Job Site (Owner) _____ Phone # _____

Job Site (Address) _____

Subdivision: _____ Lot # _____

Commercial/Industrial: _____ Other: _____

I, the undersigned, certify that the described work listed on this permit is true and correct. I acknowledge that any permit granted on the representation herein made may be revoked at any time, without notice, on a breach of representation of violation of the electrical codes.

Contractor Signature: _____ Date: _____

Property owner certification: I the undersigned do hereby certify that I will be performing the described work listed on this permit application and will not be hiring anyone else to perform said work. I am award that I can be fined \$500.00 if I allow anyone else to perform this work.

Owners Signature: _____ Date: _____

		Units		Rate	=	Fees
	Water Closets		X	\$4.00	=	
	Water Basins		X	\$4.00	=	
	Showers		X	\$4.00	=	
	Tubs		X	\$4.00	=	
	Urinals		X	\$4.00	=	
	Sinks		X	\$4.00	=	
	Garbage Disposals		X	\$4.00	=	
	Dishwashers		X	\$4.00	=	
	Washing machines		X	\$4.00	=	
	Sinks (service/mop)		X	\$4.00	=	
	Floor/hub/roof/drains		X	\$4.00	=	
	Hose bib vacuum breaks		X	\$4.00	=	



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	Backflow preventers		X	\$4.00	=	
	Water heaters		X	\$4.00	=	
	Drinking fountains		X	\$4.00	=	
	Gas piping (each outlet)		X	\$4.00	=	
	Deep seal traps		X	\$4.00	=	
	Main water supply line &/or sewer new/replacements		X	\$15.00	=	
	Commercial hot water heater		X	\$10.00	=	
	Commercial washing machines		X	\$10.00	=	
	Re-inspection		X	\$25.00	=	
Minimum Fee						\$30.00
Total Fees Due						



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Electric Power:

Service Provider: Northcentral Electric Power Association
Office Location: 225 Hwy 309S in Byhalia, MS
Phone: (662) 838-2151

Application for Electric Service - Procedure:

1. Recommend that not less than 30 days prior to needing service (earlier is better), fill out application at the Byhalia office (service desk). Will need following:
 - Owner information (Name, Billing Address)
 - 911 Address
 - Tax ID Number
 - Contractor Name & License No. (if contractor requesting service)
2. Need to provide following information for development of "Power Contract" by Northcentral.
 - Power loads, voltage required, phases needed, etc.
 - Deposit required depending on power load information
 - Deposit by either Cash, Bank Letter of Credit, or Indemnity Bond

Based on the above information, Northcentral Engineering will design service system and schedule the work required to provide service.

Owner/Contractor is responsible for installation of meter and pole for connection before Northcentral will connect power to facility.



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Natural Gas Service:

Service Provider: Town of Byhalia
Office Location: Town Hall - 161 Hwy 309S behind old high school
Contact: William Rose (901) 849-5801

Application for Gas Service - Procedure:

1. Complete attached (or pick up from Town Hall) Commercial Contract.
2. After completion, return to the Utility Department at the Town Hall.
3. Contract William Rose and provide him with the following information:
 - Facility Load requirement in BTU's
 - When gas service required
 - 911 Address of facility
4. Based on BTU load, Town Utility Dept. will establish the meter required, establish the deposit required from Owner/Contractor for cost of meter and any associated facilities to provide gas service. This deposit will be required to be paid (Cash or equivalent) before Town will order meter.
5. Upon installation of meter (depending on load) a service deposit may be required by the Town of Byhalia. This deposit can be in the form of Cash, Indemnity Bond, or Bank Letter of Credit.



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**THE TOWN OF BYHALIA
UTILITY DEPARTMENT
COMMERCIAL CONTRACT FOR SERVICE**

CONSTRUCTION COMPANY NAME _____

MAILING ADDRESS _____
STREET CITY STATE ZIP

BUSINESS OWNER NAME _____

SERVICE ADDRESS _____ LOT # _____ SUBDIVISION _____

WORK ORDER # _____ RECEIPT # _____ WATER/SEWER TAP \$ _____ DEP \$ _____

WORK ORDER # _____ RECEIPT # _____ WATER/SEWER TAP \$ _____ DEP \$ _____

THE UNDERSIGNED REQUEST THE TOWN OF BYHALIA (HEREINAFTER CALLED THE TOWN) TO SUPPLY SERVICE AT THE ABOVE MENTIONED LOCATION, AND AGREES TO RECEIVE AND PAY FOR SERVICES RENDERED IN ACCORDANCE WITH THE RATES OF THE TOWN IN EFFECT AT THE TIME OF THE SERVICE. IT IS AGREED THAT THE TOWN MAY REQUIRE, AS SECURITY FOR PAYMENT OF BILLS, A CASH DEPOSIT OF SUCH AMOUNTS AS IT MAY DEEM ADEQUATE. THE UNDERSIGNED APPLICANT AGREES TO ABIDE BY AND BE SUBJECT TO THE RULES AND REGULATIONS OF THE TOWN RELATING TO SERVICE RENDERED PURSUANT TO THIS CONTRACT. THE UNDERSIGNED AGREES TO PAY ALL COLLECTION EXPENSED, SHOULD THIS ACCOUNT BE PLACED WITH THE COLLECTION AGENCY. IF PLACED WITH AN ATTORNEY-AT-LAW FOR COLLECTION, OR HAS TO BE SUED ON, THE UNDERSIGNED WILL PAY A REASONABLE ATTORNEY'S FEE, PLUS COURT COST. IN ADDITION TO THE PRINCIPAL AND ANY INTEREST, WHICH SHALL BE ADDED TO AND BECOME A PART OF THE JUDGEMENT. THE UNDERSIGNED AGREES TO ALLOW THE TOWN AND/OR ITS AUTHORIZED AGENTS' ENTRANCE ONTO THE ABOVE MENTIONED PROPERTY TO READ METERS, MAINTAINING AND IMPROVING THE SYSTEM AND OTHER ACTIVITY CONCERNING THE OPERATION OF THE SYSTEM. I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE.

COMPANY REPRESENTATIVE _____ TAX ID # _____
PLEASE PRINT

SIGNATURE _____ DATE _____



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Potable Water Service:

Service Provider: Marshall County Water Association

Office Location: 512 Wingo Road, Byhalia, MS 38611
(Office within Industrial Park)
Phone: (662) 890-7415

Contact: David Meadows (901) 258-9733

Application for Water Service - Procedure:

1. Letter to MCWA requesting service and including the following :
 - Owner information (Name, Billing address, 911 Address of facility)
 - Site information (acreage, building size, No. of employees, etc.)
 - Number of meters required (separate meters for potable water, irrigation and wash racks, and fire loop if required for sprinklers)
2. Board of Directors of Association determine acceptability of application. Upon acceptance, letter of service will be sent to Applicant subject to:
 - Payment of Development Fee (if required) at \$500 per acre
 - Deposit Fee paid (based on expected water usage)
 - Payment of cost of meters and installation by MCWA
 - Letter from Chickasaw Trail Wastewater System that sewer service is/will be connected to facility.

Note: Wastewater (sewer) provider requires that separate meters be provided for irrigation and wash racks, any fire protection loops, and any other water usage that is not discharged into the sewer system.



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Wastewater (sewer) Service:

Service Provider: Chickasaw Trail Wastewater System

Office Location: 520 J. M. Ash Drive
Holly Springs, MS 38635
Phone: (662) 252-3916

Contact: Del Stover (662) 252-0646
Justin Hall (662) 274-4712

Application for Service - Procedure:

1. Complete the attached "Application for Sewer Service" and return to above address.
2. Contact Del Stover or Justin Hall and provide the following information:
 - 911 Address of facility
 - Number of Employees to be at facility (average & peak)
 - Any anticipated water usage other than potable water for employee use (irrigation, wash racks, process water, etc.)
 - Facility floor plan (if available)
 - Date that service is requested
3. Based on supplied information, a proposed "Agreement" will be given to owner outlining any fees (Development Fee, Connection Fee) and any other requirements (Special Aid in Construction Costs or Surcharges) that might be involved due to location of facility and proximity to existing wastewater system facilities (lift stations, connector or collection lines).
4. Upon approval by owner and service provider, owner will be given copy of "Approved Tariff" (approved and regulated by MS Public Service Commission) that details service rates, fees, and rules & regulations that apply to the service connections and to the provision of sewer service.
Copy of Tariff is available in advance by contacting either Del Stover or Justin Hall at above phone numbers.



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CHICKASAW TRAIL WASTEWATER SYSTEM
APPLICATION FOR SEWER SERVICE

Date: _____

Name: _____

Street Address: _____

Billing Address: _____

Service Request is for: _____ Residential _____ Commercial _____ Industrial

Type of Connection applied for: _____ Single lot part of a subdivision
_____ Single lot not part of a subdivision
_____ Commercial or Industrial
_____ Other - specify _____

Size of service line requested: _____

Proposed date of construction if approved: _____

Request for sewer service approved by: _____
General Manager Date

FOR OFFICE USE ONLY

Sewer Connection Fee \$ _____ Date Paid _____

Development Fee \$ _____ Date Paid _____

Date placed in service: _____

Water meter reading at installation (if applicable): _____

Account No. _____

Signed by: _____



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APPLICANT AGREEMENT

1. The applicant agrees that he understands the rules and regulations in the Tariff that he has received a copy of the Tariff that has been approved by the Mississippi State Public Service Commission. The Tariff also includes all rates, fees, and other charges that may be assessed against the applicant.
2. The Applicant agrees that he will be responsible for the monthly sewer bill and agrees to promptly pay the sewer bill within 20 days of date of mailing or receipt, whichever is earlier.
3. All fees shall be paid prior to connection to the Chickasaw Trail Wastewater System.
4. The Applicant authorizes the Marshall County Water Association to release to Chickasaw Trail Wastewater System any and all water meter readings (for the applicants property receiving sewer service) needed for billing purposes.
5. The applicant agrees to authorize any inspections of the applicants property by Chickasaw Trail Wastewater System authorized representatives that are needed (as provided for in the approved Tariff - Rules and Regulations).

Date

Applicants Signature

Property owner of record

Address

Telephone No.



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Other Services:

Garbage Pickup & Disposal: Several service providers available including:

- BFI Waste Systems (901) 794-3800
- Waste Management (901) 362-8950
- Resource Environmental Services (662) 837-4087

Telecommunications: (Depending on location within Park)

- AT&T 1-(866) 620-6000
- CenturyTel (662) 895-7777

Delivery Services:

- DHL 1-800-225-5345
- FedEx (901) 369-3600
- UPS (901) 348-4800

Postal Service: Byhalia Post Office is mail deliverer for Park area
8140 Hwy 178W
Byhalia, MS 38611 (662) 838-2400