ROBERTSON COUNTY DEVELOPMENT OFFICE
ROBERTSON COUNTY OFFICE BUILDING
527 SOUTH BROWN STREET, SPRINGFIELD, TENNESSEE 37172
615-384-3666

Application for Rezoning

** PLEASE READ CAREFULLY BEFORE SUBMITTING APPLICATION **

ANY REZONING REQUIRING A TRAFFIC IMPACT ASSESSMENT OR A TRAFFIC IMPACT STUDY, AT THE DISCRETION OF THE DEPARTMENT DIRECTOR WILL BE CONSIDERED INCOMPLETE AND WILL NOT BE PLACED ON ANY PLANNING COMMISSION AGENDA UNTIL SUCH TIME AS THE STUDY IS SUBMITTED WITH THE APPLICATION.

Applicant Information:

Name: _____
Mailing Address: _____
Email Address: _____
Phone Number: _____

Applicant's Representative Information:

Name: _____
Name of Firm: _____
Mailing Address: _____
Email: _____
Telephone Number: _____

Property Information:

Owner (if not applicant provide letter giving applicate permission): _____
Physical Address: _____
Tax Map and Parcel Number: _____
Current Zoning Designation: _____
Requested Zoning Designation: _____

Will this property be subdivided (or combined) in some way within the next year? *Yes* *No*

Purpose of rezoning request:

_____
_____
_____
_____

SUBMITTAL REVIEW PROCEDURE:

1. Deliver one (1) copy of this application & any supporting materials to the Development Office before or by the final due date (Please see attached schedule- the "Corrections Due" does not apply to this type of application)
2. Provide copy of deed to prove ownership.
3. Provide aerial photograph of the property from TN Property Viewer
4. Provide Legal description **AND** Survey of the areas to be rezoned including map and parcel number.
5. Provide water letter from utility company stating location and size of current water line, adequate pressure for domestic use and if/where fire hydrants are required.
6. Provide Traffic Assessment or Traffic Study if required.
7. Pay the review fee.
8. Email a .PDF of the application & supporting materials to hmantooth@robcotn.org
9. Attend the Planning Commission meeting. Be ready to present and answer questions. Failure to appear at the Planning Commission meeting may result in the denial of the application.

_____ _____

Owner of Record Signature & DATE Applicant's Signature & DATE