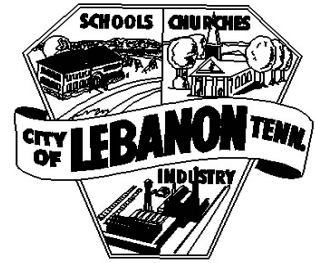


# CITY OF LEBANON, TENNESSEE

## Planning Commission Application Rezoning General Information and Checklist

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Title of Project \_\_\_\_\_  
Street Location \_\_\_\_\_  
Tax Map/Group Number \_\_\_\_\_ Parcel Number \_\_\_\_\_  
Total Acreage \_\_\_\_\_

### Approval Requested:

- |   |  |
|---|--|
| <input type="checkbox"/> Annexation & Zoning _____ Acres / To _____ | <input type="checkbox"/> Specific Plan District _____ Acres  |
| <input type="checkbox"/> Preliminary Subdivision _____ No. of Lots  | <input type="checkbox"/> Final Subdivision _____ No. of Lots |
| <input type="checkbox"/> Rezoning _____ Acres / From _____ To _____ | <input type="checkbox"/> Site Planning _____ Bldg. sq.ft.    |

### Owner/Developer:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

### Surveyor/Engineer:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

### Information required for all applications:

- Cover Letter or Written Narrative Explaining the Purpose of the Request
- Thirteen (13) Copies of all Required Information
- Non-refundable Application Fee (see current fee schedule)

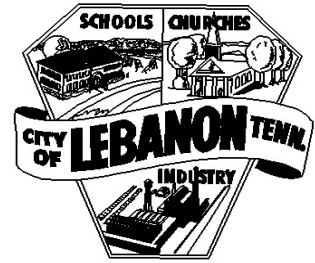
Date Application Filed \_\_\_\_\_ Date of Requested Planning Commission Meeting \_\_\_\_\_

200 North Castle Heights Avenue • Lebanon, Tennessee 37087 • (615) 444-3647 • Fax (615) 443-2899

# CITY OF LEBANON, TENNESSEE

## Planning Commission Application Rezoning General Information and Checklist

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Title of Project \_\_\_\_\_

TCA 134-304(a) states, in part, “The Commission shall approve or disapprove a plat within thirty (30) days after submission of such plat....” By signing this application, the applicant (and owners, as applicable) acknowledge that items for consideration by the Planning Commission shall be considered submitted when all required information, a completed submittal application, and fee have been received by the City of Lebanon by noon (12:00 pm) on the fourth Wednesday of every month. The Planning Commission agenda will be finalized approximately two (2) weeks after the submittal deadline. You may call 444-3647 to verify placement of an item on the agenda.

Applications shall not be placed on the Planning Commission agenda until complete information is received. It is the responsibility of the applicant to submit the required, complete and accurate information before such application may be considered.

It is understood that approval of the proposed development is conditioned upon full compliance with all applicable regulations and ordinances of the City of Lebanon and conditions imposed by the applicable commissions of the City. In cases where the applicant is not the property owner, it is also hereby acknowledged by the property owner that he or she is in full agreement with the content of this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner (if different from applicant  
provide a copy of contract showing involved parties)

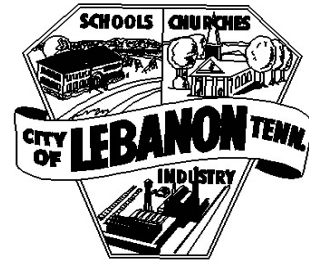
As the applicant or the applicant’s agent, I understand that it is my sole responsibility to notify my client of the time, date and location of the Preliminary Planning Commission and Planning Commission meetings at which this application will be heard and to ensure that someone representing this item is in attendance at each of these meetings.

\_\_\_\_\_  
Signature of Applicant or Applicant’s Agent

# CITY OF LEBANON, TENNESSEE

## Planning Commission Application Rezoning General Information and Checklist

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Title of Project \_\_\_\_\_

I hereby attest that I have provided a complete application and included all of the necessary attachments as required. I understand that if information is incomplete and/or otherwise not provided, this application may be deferred until such time as the necessary information is provided.

\_\_\_\_\_  
Signature of Person Completing & Submitting this Application

Provided with Submittal		For Office Use
	Location Map	
	Tax Map and Parcel Number Information for Subject Parcel(s)	
	Copy of Applicable Tax Map(s)	
	Total Acreage of Parcel(s)	
	North Arrow	
	Current and Requested Zoning of Subject Parcel(s)	
	Name, Address and Telephone Number of Owner/Developer	
	Name, Address and Telephone Number of Design Firm and Contact Person, if applicable	
	Boundary Information, Including Property Corners Marked with Iron Pins and Stakes	
	Names of All Public Streets Adjoining Property	
	Other Information as may be Requested by the Planning Commission or Staff	

This application shall be accompanied by maps, drawings or other supportive information necessary to explain the request. The applicant or a representative shall be present at the Preliminary Planning Commission and Planning Commission meetings. The Planning Commission reviews the request and makes a recommendation to the City Council. Rezoning is done by ordinance, approved by the City Council. Approving an ordinance is a two reading process with a public hearing held at the second reading. The applicant or representative shall be present at the public hearing of the City Council.

The following information is requested to comply with Ordinance 07-3203.

Title of Project \_\_\_\_\_



**CITY OF LEBANON**

**Planning and Zoning  
Interest Disclosure Form**

The undersigned does hereby warrant and affirm, to the best of his/her knowledge and belief, that no employee and/or public official of or for the City of Lebanon, Tennessee, or a member of such employee's or public official's immediate family, shall receive, or has received, any monetary or other consideration, directly or indirectly, either past or in the future, relative to the subject transaction or business for which application is being made.

\_\_\_\_\_ YES

\_\_\_\_\_ NO

If "NO," please disclose in full detail any monetary or other consideration any employee and/or public official of or for the City of Lebanon, Tennessee, or a member of such employee's or public official's immediate family, shall receive, or has received, either directly or indirectly, including the source for such consideration.

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

\_\_\_\_\_  
Applicant (Printed)

\_\_\_\_\_  
Applicant (Signed)

STATE OF TENNESSEE  
COUNTY OF WILSON

Personally appeared before me, the undersigned, a Notary Public in and for said county and state, \_\_\_\_\_, known to me to be the person who signed the foregoing instrument, and who acknowledged that he/she executed the within instrument for the purposes therein contained.

Witness my hand, at office this the \_\_\_\_\_ day of \_\_\_\_\_, 2009.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_