

**ANDERSON COUNTY REGIONAL PLANNING COMMISSION APPLICATION**

MAP: \_\_\_\_\_ PARCEL: \_\_\_\_\_ AC/LOT: \_\_\_\_\_ ZONE: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

PROPERTY OWNERS MAILING ADDRESS:  
STREET/PO BOX: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

In compliance with the Anderson County Zoning Resolution and the Anderson County Subdivision Regulations, I hereby request the Anderson County Regional Planning Commission to review my application for:

**SITE PLAN REVIEW**

- \_\_\_ C-1/C-2 SITE PLAN REVIEW (\$100)
- \_\_\_ I-1/I-2 SITE PLAN REVIEW (\$100)
- \_\_\_ I-3 SITE PLAN REVIEW (\$100)
- \_\_\_ OTHER SITE PLAN REVIEW (\$100)
- \_\_\_ PLANNED UNIT DEVELOPMENTS (\$100)
- \_\_\_ CONDOMINIUM PUD (\$100)
- \_\_\_ MOBILE HOME PARK REVIEW (\$100)
- \_\_\_ UTILITY POLICY REVIEW (No Charge)

**SUBDIVISION REVIEW**

- \_\_\_ INFORMAL CONSULTATION (No Charge)
- \_\_\_ PRELIMINARY (\$40 + \$20/lot)
- \_\_\_ FINAL (\$40 + \$20/lot)
- \_\_\_ JPE (\$70 + \$20/lot) \_\_\_ CDE (\$70)
- \_\_\_ PLAT OF CORRECTION (\$40)
- \_\_\_ WITHDRAW/RESUBMITTAL (\$20)
- \_\_\_ BOND REDUCTION REVIEW (No Charge)

DESCRIPTION: \_\_\_\_\_

VARIANCE REQUESTED: (Please be specific) \_\_\_\_\_

I do hereby swear that the information given above is true, to the best of my knowledge. I understand that all actions taken on my request will be conducted within the scope and application of the duly adopted rules, regulations, or policies of Anderson County and the State of Tennessee. If I willfully withdraw, my application will be removed from the agenda and I must submit a new application with applicable fees. If I do not submit a digital copy of my plat/map or I do not pay the application fee prior to the agenda deadline, my application will not be placed on the meeting agenda.

\_\_\_\_\_  
SIGNATURE: (APPLICANT) \_\_\_\_\_ DATE  
\*\*\*\*\*

TAKEN BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**APPLICANT SHALL SUBMIT ORIGINAL AND ONE DIGITAL COPY OF PLAT/MAP AND ALL ATTACHMENTS (e.g., drawings, estimates, deeds, etc.)**

MEETING DATE: \_\_\_\_\_ MEETING TIME: \_\_\_\_\_ MEETING LOCATION: \_\_\_\_\_

RECEIPT NO.: \_\_\_\_\_ DATE PAID: \_\_\_\_\_ CHECK NO. \_\_\_\_\_ CASH \_\_\_\_\_

AMOUNT PAID: \_\_\_\_\_