

APPLICATION TO MARYVILLE PLANNING COMMISSION

City of Maryville
Development Services Department
 416 W. Broadway Avenue (located on the ground level)
 Maryville TN 37801
 (865)273-3500, Fax (865)273-3525
 Email: development@maryville-tn.gov
www.maryvillegov.com

Staff Contact: Jordan Clark, AICP, Principal Planner 273-3520

Maryville Planning Commission Members

Keri Prigmore, Chair
 Suzette Donovan, Vice Chair
 Steve Greene, Secretary
 Fred Metz, Legislative Representative

Greg McClain, Mayor's designee
 Tom Hodge
 Dan Monat

2019 MARYVILLE PLANNING COMMISSION SCHEDULE

| Meeting Date (3rd Monday) | Submittal Date (4th Monday) |
|------------------------------|--------------------------------|
| January 22 (Tuesday) | December 26 |
| February 18 | January 28 |
| March 18 | February 25 |
| April 15 | March 25 |
| May 20 | April 22 |
| June 17 | May 27 |
| July 15 | June 24 |
| August 19 | July 22 |
| September 16 | August 26 |
| October 21 | September 23 |
| November 18 | October 28 |
| December 16 | November 25 |

Instructions for Completing Application

1. Submit completed application by noon on the **4th Monday** along with the non-refundable fee payable to the City of Maryville. (See below)

| Activity | Fee |
|------------------------------|--|
| Planned Unit Development | \$150.00 |
| Impact Overlay District | \$150.00 |
| Preliminary Subdivision Plat | 1-2 lots \$100.00 3-10 lots \$150.00 11-30 lots \$300.00 31-50 lots \$400.00 Over 50 Lots \$500.00 |
| Final Subdivision Plat | 1-4 lots \$25.00 5-30 lots \$100.00 + \$10.00 per lot Over 30 lots \$100.00 + \$5.00 per lot |
| Called Meetings | \$500.00 |
| Rezoning Requests | \$250.00 |
| Alley Closings | \$250.00 |
| Amendments to Text | \$150.00 |

2. If you are requesting a called meeting, the same procedures apply with the exception of the submittal deadline. Once you have paid the \$500.00 called meeting fee and submitted the application, a meeting will be scheduled at the earliest date that a quorum can be present and notification requirements can be met. Each agenda item shall constitute a separate item and shall therefore be subject to a separate called meeting charge as outlined in the section above.
3. Be sure that the application has been completely filled out. If a question is not applicable, please draw a line through the space provided or mark "n/a" (not applicable). **The Commission is not required to hear applications that are incomplete.** The burden of presenting a complete application to the Commission shall be upon the applicant.
4. The meetings are the **3rd Monday of each month at 5:00 p.m.** in the council chambers located on the middle level of the Maryville Municipal Center, 400 W. Broadway. **YOU OR YOUR REPRESENTATIVE SHOULD ATTEND THE MEETING.**

For office use only:

| | |
|--|-------------------------|
| | Completed application |
| | Fee paid |
| | Fifteen copies of plats |

Application To Maryville Planning Commission

Applicant: _____ Date: _____

Mailing Address: _____

Email Address: _____

Phone: _____ Fax: _____ Email: _____

Tax Map Number: _____ Group: _____ Parcel: _____

(May be obtained from web site www.assessment.state.tn.us/SelectCounty.asp or Blount County Property Assessor's Office 273-5850)

Please complete the following information if the applicant is not the property owner.

List below legal authority by which applicant may submit application (i.e. lessee, agents, contract vendee):

Property Owner: _____

Property Owner's Address: _____

Phone: _____ Fax: _____ Email: _____

Type of Submittal (check one):

| | |
|-------------------|--------------------------|
| Preliminary Plat | <input type="checkbox"/> |
| Final Plat | <input type="checkbox"/> |
| Rezoning | <input type="checkbox"/> |
| Alley/ROW Closing | <input type="checkbox"/> |

| | |
|--------------------------|--------------------------|
| Planned Unit Development | <input type="checkbox"/> |
| Impact Overlay District | <input type="checkbox"/> |
| Amendment to Text | <input type="checkbox"/> |
| Called Meeting | <input type="checkbox"/> |

Use additional paper if necessary to complete the following.

| |
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| Preliminary Plat (Describe the proposed plat) |
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| Final Plat (Describe the proposed plat and any differences from the preliminary plat – if applicable) |
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| Replat (Explain why property is being replatted, what lot lines are being moved and why, etc.) |
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| Rezoning (Please describe how property is currently being used and the proposed use) |
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| Alley or ROW Closing (Describe the reason for the request to close) |
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| Amendment to Text (Explain why the amendment is necessary) |
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| Planned Unit Development or Impact Overlay District (Describe) |
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Applicant's Signature

Date