

APPLICATION TO THE MARYVILLE BOARD OF ZONING APPEALS

City of Maryville
Development Services Department
 416 W. Broadway Avenue (located on the ground level)
 Maryville TN 37801
 (865)273-3500
www.maryvillegov.com

Staff Contact:
 Valentina Amon, Land Development Administrator 865-273-3509
 Email: vamon@maryville-tn.gov

Board of Zoning Appeals Members

(City residents appointed by the City Mayor and confirmed by City Council)

Suzette Donovan, Chair
 Mike Brown, Vice Chair
 James Tomiczek, Secretary
 Bill Steverson
 Clint Woodfin

2024 MARYVILLE BOARD OF ZONING APPEALS SCHEDULE:

Meeting Date (3 rd Thursday)	Submittal Deadline (4 TH Monday by noon)
January 18	December 26 (Tuesday)
February 15	January 22
March 21	February 26
April 18	March 25
May 16	April 22
June 20	May 28 (Tuesday)
July 18	June 24
August 15	July 22
September 19	August 26
October 17	September 23
November 21	October 28
December 19	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
Special Exception Request	\$150.00
Planned Unit Development	\$150.00
Impact Overlay District	\$150.00
Variance or any other request to BZA	\$150.00
Telecommunications Towers/Equipment Review	\$1,000.00

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, the planning office will call the board and 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. The Board will base their decision on the criteria that deals with the questions on the application. If a question is not applicable, please draw a line through the space provided or mark "n/a" (not applicable). **The Board is not required to hear applications that are incomplete.** The burden of presenting a complete application to the Board shall be upon the applicant.
4. The meetings are the **3rd Thursday 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 MUST ATTEND THE MEETING; OTHERWISE, THE BOARD WILL NOT HEAR THE ITEM.**

For office use only:

Completed application

Fee paid

Application To The Maryville Board of Zoning Appeals

Applicant: _____ Date: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Address for Property: _____

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):

Telecommunication Tower

Special Exception

Variance

Administrative Appeal

Applicant's Signature

Date

