

**SUMNER COUNTY  
CONSTRUCTION & DEVELOPMENT**

355 N. Belvedere Dr., Room 202  
Gallatin, TN. 37066  
615-452-1467 / 615-451-6074 fax

Reviewed By _____
MM/DD/YR _____
Office Staff Only

**Board of Zoning Appeals Application**

**Application for:**  
Conditional Use Permit \_\_\_\_\_ Setback Variance \_\_\_\_\_ Sign \_\_\_\_\_ Administrative Appeal \_\_\_\_\_ Hardship \_\_\_\_\_

Date Submitted: \_\_\_/\_\_\_/\_\_\_ Tax Map# \_\_\_\_\_ Group \_\_\_\_\_ Parcel \_\_\_\_\_ Acres \_\_\_\_\_ Zoning \_\_\_\_\_

**Project Name**

**Project Address:**

**Property Owner**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Contact: \_\_\_\_\_

**Applicant**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Contact: \_\_\_\_\_

**Purpose:** Briefly describe the reason for this application

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

**Signature of Owner or Owner's Agent:** \_\_\_\_\_  
(Agent Documentation Required)

**Listed below is what may be required for the site plan review and application submittal.**

\_\_\_\_\_ Please bring with you the recorded Warranty Deed for the property that you are requesting a hearing for. If you are not the property owner then the owner will need to sign a Letter of Agency form. **You can purchase a copy of the deed from the Register of Deeds located in room #201. (615-452-3892)**

\_\_\_\_\_ Application fee is due upon the submittal request:  
Conditional Use Permit - \$300.00 (and pay \$300.00 every 2 years for continuation)  
Setback Variance, Sign, or Administrative Appeal - \$75.00  
Hardship – No Fee

\_\_\_\_\_ Sketch a site plan that shows all the property line boundaries, including the county approved road and each of the following as they apply to your request;

- \_\_\_ Sketch the building(s), new or existing and identify the one that will be used for the business.
- \_\_\_ Show how many feet that these building(s) are located from all property line boundaries, fences, and other structures located on property.
- \_\_\_ Show the; 1) septic system 2) drain field(s) 3) copy of septic permit OR an affidavit of disclosure from the Environmental Health Dept. located in Room 210. If there is not a need for a septic system associated with your request you will need to initial and date in the area located below as an acknowledgment on your part that you will not need a septic system. (615-451-5858)

\_\_\_\_\_  
Owner/ Purchaser Signature

\_\_\_\_\_  
Dated

- \_\_\_ Show the location(s) of any sign(s) that are to be placed on the property and how many feet that they would be located from county approved roads. (a sign application is required with this request)
- \_\_\_ Show the location of vehicle parking spaces AND indicate if your intentions are to request a variance for a “dust free parking surface.” You need to indicate this on your site plan.
- \_\_\_ Show how many vehicle parking spaces.(include any handicap)
- \_\_\_ Specify if the vehicle parking spaces are to be used for customer parking or semi-temporary parking.

\_\_\_\_\_ Show existing or proposed landscape buffers, screening, fencing, entrance(s) from the county approved road(s).