



Sumner COUNTY Board of Zoning Appeals

355 N. Belvedere Drive Room 202, Gallatin, Tennessee, 37066

OFFICE: (615) 451-6097 FAX: (615) 451-6074

CONDITIONAL USE PERMIT APPLICATION					
Date Submitted:	Tax Map:	Group:	Parcel:	Acres:	Zoning:
Project Address:					
Property Owner:					
Address:					
City:		State:		Zip Code:	
Phone:			Email:		
Applicant: (If different from property owner)					
Address:					
City:		State:		Zip Code:	
Phone:			Email:		
Was a pre-application meeting held with staff? Yes No			Date of Meeting:		
Purpose: Briefly describe the reason for this application:					

Signature of Owner or Owner's Agent:					
<p style="color: red;">I understand that this Conditional Use Permit, if granted, can never be transferred to another property owner or another individual. This Conditional Use Permit will cease immediately at such time as property owner no longer owns or resides at the referenced property location.</p> <p style="color: red;">Signature of property owner: _____</p>					

Items required at time of application submittal:

1. _____ **Application**
2. _____ **Application Fee of \$300.00 (a \$300.00 fee will be due every two (2) years upon request for this Conditional Use Permit be continued by the Board of Zoning Appeals)**
3. _____ **Warranty Deed**
4. _____ **Copy of the septic permit** OR an affidavit of disclosure from the Environmental Dept. (Room 208)
5. _____ **Plot Plan** containing all information listed below:
 - Show how many feet that any existing and/or proposed building(s) are located from all property line boundaries, fences, and other structures located on the property.
 - Show setbacks and easements (if applicable) to the property.
 - Show the septic system.
 - Show the drain field (s)
 - Show the locations of signs (if any). A sign application is required with this request
 - Show location of vehicle parking spaces AND indicate if your intentions are to request a variance for a "Dust Free Parking Surface"
 - Show how many vehicle parking spaces including any handicap parking
 - Specify if the vehicle 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)

Received by: _____ Date: _____ Receipt #: _____

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