



APPLICATION FOR REZONING

Town of Estill Springs
100 Hudgins Street
Estill Springs, TN 37330
931-649-5188

(1) Name:					
Address:					
Phone Number:					
Property Characteristics					
(2) Franklin County Map, Group and Parcel Number:		Legal Description of Property:		Lot No.:	
Current Zoning:		Acreage:			
Reason for Rezoning (Please list in detail the type of work to be done if this request refers to a business)					
(3) Proposed Zone Change, Modification or repeal together within written justifications for the requested zone change:					
(4) Names and addresses of adjacent property owners (including those property owners across streets, roads, highways, and/or railways and waterways which border the applicant's property)					
If additional space is required, please attach a separate piece of paper with the information listed					

(5) Notice of rezoning letters: *Notice of rezoning will be mailed to neighbors by the Estill Springs City Hall*

(6) Eight (8) copies of a map depicting the property requested for rezoning. These maps shall be at a scale of no less than 1"=100' and no larger than 1"=30' and show the following information:

a.	Title, north arrow, graphic scale, date, civil district, and the acreage of the property to be rezoned.	
b.	Dimensions in feet of property to be rezoned.	
c.	All roads and easements within adjoining property to be rezoned.	
d.	Location, size, type and current use of any building on the property requested for rezoning.	
e.	Location of the adjoining property owners in relation to the property to be rezoned.	

(7) A non-refundable fee of \$300.00 is due at time of application.

Additional Notes:

Requested By: _____ Date: _____