100 Public Square ♦ Mount Pleasant, Tennessee 38474 ♦ Phone 931-379-7717 Ext. 116 ♦ Fax 931-379-5418



Prior to a request being placed on the BZA Agenda, the applicant must furnish the following information:

Property Owner:		
Address:		
Phone Number:	Email:	
Applicant:		
Mailing Address:		
Phone Number:	Email:	
Property Address	::	
County Tax Map	: Group:	Parcel(s)
Current Zoning:	Size:	City:
Case No. assigne	ed: Fee Paid: Yee	s 🗌 No Date:
BZA action:	Tabled Denied A	Approved
Submittals:		
Comments from Staff Review:		
Existing Use:		
Proposed Use:		Date of Action:

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City of Mount Pleasant "Experience Our History.....Explore Our Possibilities" Department of Planning and Zoning



## Appeal of Administrative Decision

Indicate the decision/interpretation under appeal, including the City Official with Title and Department, and the applicable section(s) of the Zoning Ordinance in question.

## If this information is not listed, the item shall be rejected by staff as incomplete.

Appeal Of:	
Zoning Ordinance Section:	
City Official:	

- 1. If requesting a Setback Variance, indicate below which yard the setback variance is located within and provide an exact measure of the distance of the new setback in feet.
- 2. If requesting a Sign Variance, indicate below which type of sign the variance is for and provide the permitted signage, in addition to the requested amount of signage.
- 3. If requesting a Variance of any other provision of the Zoning Ordinance, provide a detailed explanation below in "Other Variance Request."

## If this information is not listed, the item shall be rejected by staff as incomplete

SETBACK VARIANCE (Check Applicable Yard)	<ul> <li>□ Front Yard</li> <li>□ Side Yard</li> <li>□ Read Yard</li> </ul>	Requested Setback (ft):
SIGN VARIANCE (Check Applicable Sign) Requested Signage (ft):	<ul> <li>Freestanding</li> <li>Wall Sign</li> <li>Other Sign</li> </ul>	Permitted Signage (ft):
Other Variance Request:		
Zoning Ordinance Section:		
Reason For Request:		

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AT OF THE	<i>"Experience Our HistoryExplore Our Possibilities"</i> Department of Planning and Zoning	AGRICUL DURE.
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Adjacent property owner(s) affected by request:

Property Owner:		
Address:		
Tax Map Parcel #	Zoning:	
Property Owner:		
Address:		
Tax Map Parcel #	Zoning:	
Property Owner:		
Address:		
Tax Map Parcel #	Zoning:	
Property Owner:		
Address:		
Tax Map Parcel #	Zoning:	
Property Owner:		
Address:		
Tax Map Parcel #	Zoning:	