

# CITY OF TULLAHOMA

## Department of Planning & Codes

P.O.Box 807  
Tullahoma, TN 37388

Phone 931-455-2282  
Fax 931-454-1765



### BOARD OF ZONING APPEALS APPLICATION

#### PROJECT INFORMATION

Project Name: \_\_\_\_\_ Date: \_\_\_\_\_

Project Location / Description: \_\_\_\_\_

Tax Map & Parcel #: \_\_\_\_\_ Coffee Co. \_\_\_\_\_ Franklin Co. \_\_\_\_\_

#### APPLICANT INFORMATION

\*Name: \_\_\_\_\_ Company: \_\_\_\_\_

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

Contact Information: Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

*\*If the applicant is not the listed owner of the property as shown on the official tax rolls of the county, the applicant must submit a letter with this application to give the applicant permission to act on the behalf of the legal owner.*

#### REQUIRED FEES

- |   |          |
|---|----------|
| 1) _____ Interpretation of the Zoning Map | \$ 50.00 |
| 2) _____ Request Customary Home Occupancy | \$ 75.00 |
| 3) _____ Request Zoning Variance          | \$ 75.00 |
| 4) _____ Request Code Variance            | \$ 75.00 |

Total Fees Submitted: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that I have read and examined this document and know the same to be true and correct. All documents, plats, plans and other information supplied with this application are true and correct representations of the project.

\_\_\_\_\_  
Signature of Applicant / Contractor or Authorized Agent

\_\_\_\_\_  
Date