



**TULLAHOMA BOARD OF ZONING APPEALS**

321 N. Collins Street, Tullahoma, Tennessee 37388  
OFFICE 931.455.2282 FAX 931.454.1765

**APPLICATION FOR CONDITIONAL USE PERMIT**

**\$100 Fee**

Applicant's Name

Applicant's Mailing Address

City

State

Zip

Phone Number

Fax Number

Email

*The applicant is responsible for notifying the Planning & Codes Department if any contact information has*

**PLEASE COMPLETE THE FOLLOWING PROPERTY INFORMATION:**

Property Owner (If different from Applicant)

Property Address

City

State

Zip

Tennessee

Tax Map

Group

Parcel

Size of Parcel

Deed Book

Page

Present Zoning of Property

Present Use of Property

**PLEASE COMPLETE THE FOLLOWING PROPOSED USE INFORMATION:**

A **Concept Plan** drawn to scale showing all existing and proposed buildings, septic system and field line areas, driveways, proposed parking areas, building setbacks, and any other pertinent information regarding the application must be submitted with this form.

Explain **in detail** what you propose to do with this property and outline your long-term plans for the property. Staff recommends attaching an extra sheet of paper in order to provide more detail on the proposed use of the property.

Conditional use permits are reviewed based on the standards in Section 1005 of the City of Tullahoma Zoning Ordinance. Please explain how your application will be able to meet each of these standards. If additional space is needed, please attach extra paper to the application.

Explain how your proposal will be designed, located, and operated so that the public health, safety and welfare will be protected:

Explain how your proposal will not adversely affect other property in the area in which it is located:

Demonstrate that your proposal conforms to all applicable provisions of the City of Tullahoma Zoning Ordinance for the district in which it is to be located, is necessary for public convenience in that location, and if applicable, meets the specific standards contained in Section 1005:

Explain how your proposal is located in a manner that is compatible with the surrounding area and provide safety to those using the facility:

**PLEASE NOTE THAT THE BOARD OF ZONING APPEALS MAY IMPOSE SUCH OTHER CONDITIONS AND RESTRICTIONS UPON THE PREMISES BENEFITED BY A SPECIAL EXCEPTION PERMIT AS MAY BE NECESSARY TO COMPLY WITH THE PROVISIONS SET OUT HEREAFTER IN THIS SECTION IN ORDER TO REDUCE OR MINIMIZE THE INJURIOUS EFFECT OF SUCH CONDITIONAL USE PERMIT UPON AND ENSURE COMPATIBILITY WITH SURROUNDING PROPERTY AND TO BETTER CARRY OUT THE GENERAL INTENT OF THIS ORDINANCE.**

The following section is for accessory dwelling units (ADU). Please **SKIP** to the next section if this is not applicable.

Size of proposed ADU (square feet)	Size of principal residence (excluding garage or utility space)
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Are there existing detached accessory structures on the property?  YES  NO  
If yes, please indicate the total square footage of existing detached accessory structures:

Which method do you plan to use to create the ADU?

- An internal conversion/remodel within an existing, detached single-family dwelling.
- Add new square footage to an existing single-family dwelling.
- Include an ADU within a single-family, detached dwelling at the time of its construction.
- Convert an existing, detached accessory structure.
- Construct a separate, detached ADU on the same lot as the primary dwelling unit.

Which of the two units will be the designated "owner occupied" unit?  Principal Dwelling  Accessory Dwelling

If the ADU is a new addition or detached building, please provide elevations of the ADU with the primary dwelling unit to demonstrate how the ADU matches the design of the existing/principal dwelling with regards to materials, colors, window styles, and roof styles.

The following section is for major home based businesses and non-residential special exceptions. Please **SKIP** to the signature block if this is not applicable.

Do you plan to have a sign? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, how many signs and what size(s)?
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Will you employ anyone? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, how many employees will be on-site?
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Do you plan to build any new buildings? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, how many and what size?
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What days and hours will your business be open?

Will business vehicles be parked on site? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, how many vehicles?
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	What type of vehicles?
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Is there a fire hydrant within 1,000 feet of the property?  YES  NO

If No, can a fire hydrant be installed within 1,000 feet of the property?  YES  NO

Is the parking lot to be paved?  YES  NO

NOTE: Please consult with planning & codes staff to determine if a variance from the provisions of the City of Tullahoma Zoning Ordinance will be required for your application. If a variance is required then you will need to fill out a separate variance application to be processed along with your conditional use permit.

**STAFF USE ONLY:** A variance application is required  YES  NO

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Applicant's Signature	Applicant's Name (Printed)	Date
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PLEASE INITIAL THE FOLLOWING POLICY STATEMENTS TO INDICATE THAT YOU HAVE READ AND UNDERSTAND THEM:

Applicant Deferral/Withdrawal Policy: It is the policy of the Board of Zoning Appeals that any requests to defer their consideration of a Conditional Use Permit be submitted to the Planning & Codes Department in writing prior to the scheduled public hearing. If an applicant requests deferral or withdrawal after processing has begun, fees are non-refundable. Applicants requesting a deferral will be charged the cost of preparing and mailing new notices of public hearing. Applicants may not defer an application for a period exceeding three (3) months from the original Board of Zoning Appeals public hearing date of said application. Any application not considered before the three (3) month deferral timeframe will be required to submit a new application, along with any required fees, and will be subject to the regulations in effect at that time.

Applicants Initials \_\_\_\_\_

Commission Deferment Policy: When an applicant or their representative is not present at the regularly scheduled meeting of the Board of Zoning Appeals (BOZA), the BOZA shall defer said application to their next scheduled meeting.

Applicants Initials \_\_\_\_\_

Typically, Conditional Use Permit applications require site inspections and building permits upon approval. All buildings must comply with applicable building codes and the American Disabilities Act (ADA) for handicap accessibility. Please contact the Planning & Codes Department at 931-455-2282 with any questions about building permit application process, fees, or requirements.

Applicants Initials \_\_\_\_\_

The Board, its members, and employees, in the performance of its work, may enter upon any land within its jurisdiction and make examinations and surveys and place or remove public notices as required by this ordinance.

Applicants Initials \_\_\_\_\_

**CHECKLIST**

Before we can accept your special exception application, please make sure you have all the items listed below:

- |   |   |
|---|---|
| <input type="checkbox"/> A completed application.   | <input type="checkbox"/> A concept plan drawn to scale. |
| <input type="checkbox"/> A copy of the deed to the property.  | <input type="checkbox"/> \$100 application fee.         |
| <input type="checkbox"/> A Letter of Attorney-in-Fact if submitted by anyone other than the current land owner. |   |

**STAFF USE ONLY**

Accepted by	Application Number
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