

DANDRIDGE PLANNING COMMISSION

REQUEST FORM

Presenter: _____ Date: _____

Property Owner(s): _____

Property Address: _____

(House#, Street Name, Subdivision Name if applicable)

Map and Parcel Number(s): _____

Phone Number(s) _____ or _____

(Please list number where you can be reached during the day)

Attention: All requesters to the Town of Dandridge Planning Commission and/or Board of Zoning Appeals are required to present their materials in accordance to the written regulations within the City's Zoning Ordinance and Subdivision Regulations. Failure to follow these regulations prior to submission will result in having your request removed from the City's Planning Commission and/or Board of Zoning Appeals monthly meeting until such requirements are met.

Special Note: According to the Tennessee Coded Annotated (T.C.A) all subdivision plats (in areas without city sewer/water services) presented to the Town of Dandridge's Planning Commission are required by law to have the signature of the Jefferson County Health Department representative prior to **FINAL PLAT** submission.

_____	Site Plan Review	\$50.00
_____	Rezoning Request _____ to _____	\$50.00
_____	Subdivision Plats (Preliminary/Final)	
	• 2 lots or less	\$20.00
	• 3-5 lots	\$30.00
	• 6-15 lots	\$60.00
	• 16-30 lots	\$70.00
	• 31-50 lots	\$80.00
	• 50+ lots	\$100.00
_____	Annexation	\$25.00
_____	Board of Zoning Appeals (Explanation)	\$50.00
_____	Point(s) of Clarification	No Fee

Total amount of fees paid: _____ Receipt Number: _____