



# Metropolitan Nashville Planning Department

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## Zone Change Application

The METROPOLITAN COUNCIL requires all information shown on the checklist below. It is strongly recommended you contact the district councilmember about your zone change application, prior to submitting it to the Planning Dept.

**Application No.** \_\_\_\_\_

**Date Submitted:** \_\_\_\_\_

(Assigned by Planning Department staff)

Associated cases:    PUD    General Plan Amendment    Subdivision    Mandatory Referral

Map	Parcel(s) <small>If portion, use "part of parcel..."</small>	Current Zoning	Requested Zoning	# of Acres
<b>Total Acres</b>				

Reason(s) for this zone change request: \_\_\_\_\_

**Community Plan Consistency** (to be completed by applicant):

\_\_\_\_\_   
 Community Plan # (1-14)

\_\_\_\_\_   
 Land Use Policy (e.g. Residential Low Medium)

### CONTACT INFORMATION

**NOTE:** All correspondence will be e-mailed to both the property owner and surveyor. If the property is owned by a corporation, LLC, LLP, company, etc. then you'll need to submit a letter on company letterhead or documentation that the individual is authorized to act on behalf of the entity with regard to this particular application. **You must fill-in all information --- fields are not optional.**

**PROPERTY OWNER #1**

Property Owner's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_  business  home  cell

Phone: \_\_\_\_\_  business  home  cell

Fax: \_\_\_\_\_  business  home

E-mail: \_\_\_\_\_

**Owner Signature:** \_\_\_\_\_

Print Name: \_\_\_\_\_

**PROPERTY OWNER #2**

Property Owner's Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_  business  home  cell

Phone: \_\_\_\_\_  business  home  cell

Fax: \_\_\_\_\_  business  home

E-mail: \_\_\_\_\_

**Owner Signature:** \_\_\_\_\_

Print Name: \_\_\_\_\_

**APPLICANT**

Applicant's  
Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_  business  home  cell

Phone: \_\_\_\_\_  business  home  cell

Fax: \_\_\_\_\_  business  home

E-mail: \_\_\_\_\_

**Applicant  
Signature:** \_\_\_\_\_

Print Name: \_\_\_\_\_

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***Checklist***

- \_\_\_\_\_ Application filled-out completely
- \_\_\_\_\_ Authorization letter on company letterhead for corporation, LLC, LLP
- \_\_\_\_\_ Map showing property to be rezoned
- \_\_\_\_\_ Application fee
- \_\_\_\_\_ Trustees - disclosure of all beneficiaries
- \_\_\_\_\_ Proof of payment of all delinquent property taxes

**Application Fee: \$1,400.00**

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_