



**Metropolitan Nashville Planning Department**  
 Metro Office Building 615/862-7190  
 800 President Ronald Reagan Way  
 Nashville, TN 37219  
[planningstaff@nashville.gov](mailto:planningstaff@nashville.gov)

## Contextual Overlay Application

The Metropolitan Council requires all information shown on the checklist below. You must contact the district councilmember about your zone change application prior to submitting it to the Planning Dept. Submit electronically through the Planning Portal [Web Transfer Client](#). Please note it can take several days to be issued a username and password. This request should occur well before you intend to submit. Contact [ePlanPlanning@nashville.gov](mailto:ePlanPlanning@nashville.gov) with any issues, or to request a username and password.

**ALL DOCUMENTS MUST BE IN THE PORTAL AT LEAST 24 HOURS PRIOR TO THE NOON FEE DEADLINE AS SHOWN ON THE SUBMITTAL SCHEDULE.**

Planning will email you with a case number when your application has been deemed complete and accepted. Once you receive the case number, you may pay your fees. Checks should be made payable to “Metropolitan Government” or you may pay in person or over the phone by credit card with an additional convenience fee.

**Application No.** \_\_\_\_\_  
 (Assigned by Planning Department staff)

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

**Application Fee**  
**New/Cancellation: \$1,375**

**Associated Cases?**

- Overlay \_\_\_\_\_
- Zone Change \_\_\_\_\_
- Specific Plan \_\_\_\_\_
- Mandatory Referral \_\_\_\_\_
- PUD \_\_\_\_\_
- UDO \_\_\_\_\_

Parcel Identification Number: If portion, state “part of parcel...”	Current Zoning	Requested Zoning	# of Acres
<b>TOTAL ACRES</b>			

**Reason(s) for this Application and Description of project:**

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**Community Plan/Land Use Policy Consistency** (to be completed by applicant):

Community Planning Area [Community Plans | Nashville.gov](#) Land Use Policy (e.g. Neighborhood Maintenance, Neighborhood Evolving, Mixed-Use Corridor, etc.) Available on [Parcel Viewer](#) at selected layer – Planning/Community Character Policy) [Community Character Manual | Nashville.gov](#)

**CONTACT INFORMATION**

**APPLICANT:** All communication will be with the applicant. For LLC, LP and corporations see website for appropriate signatory documentation. [Acceptable-Documents-for-Owner-Signature.pdf](#)

- Signature Required- You may sign electronically with the draw feature in the upper left corner.

**PROPERTY OWNER #1**

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

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

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

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

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

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

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

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

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

**\*\*\*CONTINUE TO NEXT PAGE\*\*\***

**APPLICANT**

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

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

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

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

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

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

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

Per Resolution RS2019-1788, I certify that I have notified the district Councilmember of this request, and the Metropolitan Council Office (staff Planning & Codes Liaison: [matthew.wilkinson@nashville.gov](mailto:matthew.wilkinson@nashville.gov) ). The **attached email** is documentation of said notification.

Initial: \_\_\_\_\_

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**CHECKLIST**

- Application filled out completely
- Signatory authorization for corporation, LLC, LLP
- Map showing property to be rezoned
- Application fee
- Proof of being current in payment of property taxes
- Copy of email sent to Council office and Councilmember

I have reviewed this application and its associated Institutional Overlay SUBMITTAL CHECKLIST fully, and believe I have complied with all the requested submittal items. I acknowledge that plans or documents missing any of the requested information may be deemed incomplete and not accepted for project review. Further, I understand that additional information or clarification may be requested during the review process or prior to application approval.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_