

**COFFEE COUNTY PLANNING COMMISSION**

**APPLICATION**

(Please print or type)

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Authorized Representative: \_\_\_\_\_ Phone: \_\_\_\_\_

Rep's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Control Map \_\_\_\_\_ Parcel \_\_\_\_\_ Lot Area: \_\_\_\_\_ Zone: \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING (ATTACH A SEPARATE SHEET IF NECESSARY):**

*State the specific request*

- PLEASE CHECK:
- |   |  |
|---|--|
| <b>SUBDIVISIONS</b>                             | _____ Temporary Use Permit \$200.00                    |
| <b>[MINOR]</b>                                  |  |
| _____ Preliminary/Final Plat \$150.00           | _____ House Moving Permit \$200.00                     |
| <b>MAJOR:</b>                                   |  |
| _____ Preliminary Plat \$15/lot                 | _____ Site Plan Review \$250.00                        |
| _____ Final \$10/lot + \$400 Construction Plans | _____ Request for Re-zoning \$300.00                   |
|   | _____ Request for change in Zoning Resolution \$300.00 |

*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

Please Print Name \_\_\_\_\_