

# COFFEE COUNTY ZONING ADMINISTRATION

## APPLICATION FOR ADMINISTRATIVE REVIEW

(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: \_\_\_\_\_

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

*State the specific issue for the Administrative Review and why the review has been requested:*

Does this request involve the construction or placement of buildings or accessory structures on this property? If so, please describe all.

#### The following documents are required to be submitted with your request:

- A sketch plan of your site, include all drives, parking spaces, primary and accessory structures.
- County Assessor's map showing the boundaries of the subject property.
- The Appropriate Fee of \$200.00

I the undersigned represent that all the facts in this application are true to the best of my knowledge.

I am aware that all other necessary permits are required before any work or construction may begin.

**Failure to apply for other necessary permits before work commences will render the request null and void.**

Date: \_\_\_\_\_ Signature of Property Owner or Representative \_\_\_\_\_

(PRINT) \_\_\_\_\_