LOUDON COUNTY
OFFICE OF
PLANNING & COMMUNITY DEVELOPMENT
274 Blair Bend Drive • Loudon, TN 37774

LOUDON COUNTY **BOARD OF ZONING APPEALS REQUEST** APPLICATION

Receipt No. _____ $100.00 Non-Refundable Fee _____

Verified By _____ (initials) Case No. _____

Date Received _____

Name of Applicant	**Address of Applicant**
Home Phone	**Work Phone**

Applicant is: (Circle One) Owner Agent

Address of Property	**Tax Map**	**Parcel No.**	**Zoning District**

Type of request:

_____ Special Exception

_____ Variance - Type:
Frontyard _____
Sideyard _____
Rearyard _____
Lot size _____
Medical Hardship _____

Explain the circumstances warranting the need for a special exception/variance request:

_____

_____

In making this request the applicant certifies that the information given is, to the best of his/her knowledge, true and accurate. The applicant certifies that he/she has the legal authority to request consideration of the variance/special exception for this property. It is understood and agreed by the applicant that any error, misstatement or misrepresentation of fact, either with or without intention on his/her part, shall constitute sufficient grounds for denial of this request.

Signature of Owner _____

Date _____

Signature of Applicant (if different) _____

BOARD OF ZONING APPEALS ACTION

Date Petition Heard: _____

Approved: _____ Approved Subject to Conditions: _____

_____

Denied: _____ Reason Denied: _____

_____

_____ **Chairman, Board of Zoning Appeals**