



Suite 403 • City County Building
 400 Main Street
 Knoxville, Tennessee 37902
 865 • 215 • 2500
 FAX • 215 • 2068
 www.knoxmpc.org

Similar Use Determination

Name of Applicant: _____

Date Filed: _____ Application Accepted by: _____

Fee Amount: _____ Meeting Date: _____ File Number: _____

<p style="text-align: center;">PROPERTY INFORMATION</p> <p>Address: _____</p> <p>General Location: _____</p> <p>_____</p> <p>Tract Size: _____ No. of Units: _____</p> <p>Zoning District: _____</p> <p>Existing Land Use: _____</p> <p>_____</p> <p>Planning Sector: _____</p> <p>Sector Plan Proposed Land Use Classification: _____</p> <p>_____</p> <p>Growth Policy Plan Designation: _____</p> <p>Census Tract: _____</p> <p>Traffic Zone: _____</p> <p>Parcel ID Number(s): _____</p> <p>Jurisdiction: <input type="checkbox"/> City Council _____ District <input type="checkbox"/> County Commission _____ District</p>	<p style="text-align: center;">PROPERTY OWNER/OPTION HOLDER</p> <p>PLEASE PRINT</p> <p>Name: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p> <p>E-mail: _____</p>
<p style="text-align: center;">USE REQUESTED</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">ATTACH AS A SEPARATE DOCUMENT:</p> <p><input type="checkbox"/> A detailed description of the proposed specific use. Including: number of employees, hours of operation, products made or sold, services performed, special equipment used.</p> <p><input type="checkbox"/> A statement indicating how the various permitted uses listed in the zoning regulations are similar in nature, operations, and character to the proposed use in this application and how they would be compatible.</p> <p><input type="checkbox"/> Floor/site plan factors. Details regarding limitations (such as maximum floor area or site area) on building and site development for the following: office areas, warehousing areas, manufacturing areas, showroom/retail areas.</p>	<p style="text-align: center;">APPLICATION CORRESPONDENCE</p> <p>All correspondence relating to this application should be sent to:</p> <p>PLEASE PRINT</p> <p>Name: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p> <p>E-mail: _____</p>
	<p style="text-align: center;">APPLICATION AUTHORIZATION</p> <p>I hereby certify that I am the authorized applicant, representing ALL property owners involved in this request or holders of option on same, whose signatures are included on the back of this form.</p> <p>Signature: _____</p> <p>PLEASE PRINT</p> <p>Name: _____</p> <p>Company: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Telephone: _____</p> <p>E-mail: _____</p>

