



Request Date \_\_\_\_\_

# Commercial Zoning Compliance Permit Application

Sevier County Planning and Zoning Department  
227 Cedar Street ~ Sevierville, TN. 37862  
Telephone: (865) 453-3882 Fax: (865) 453-5923

**Applicant Name:** \_\_\_\_\_ **Phone No.:** \_\_\_\_\_  
Developer Engineer Architect Surveyor

**Address:** \_\_\_\_\_  
Street City State Zip

**Applicant/Owner Email:** \_\_\_\_\_  
(Email for contact person concerning this application)

### -----Owner Information -----

**Property Owner:** \_\_\_\_\_ **Phone No.:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street City State Zip

### -----Property Information -----

**Civil District:** \_\_\_\_\_ **Tax ID:** \_\_\_\_\_  
Map Group Parcel

**Property Address:** \_\_\_\_\_  
Street City State Zip

### ----- Commercial Site Plan Review Request -----

**Current Zoning District:** \_\_\_\_\_ **Proposed Use:** \_\_\_\_\_

**The Sevier County Zoning Resolution requires that any new commercial, industrial, multi-family, public and semi-public developments be reviewed and approved by the Sevier County Planning Department and or the Sevier County Planning Commission. Refer to the Sevier County Zoning Resolution for specific requirements for Commercial Site Plans.**

I, the undersigned being the owner or applicant for property described above, affirm the accuracy of the above information about the property and use described. I also authorize an agent of Sevier County Government to visit these premises for the purpose of inspecting the property. Any incorrect information provided causes this application and subsequent request to be null and void.

\_\_\_\_\_  
**Property Owner / Applicant**

\_\_\_\_\_  
**Date**

<b>For Office Use Only</b>	
PC _____	Zoning Map # _____
TR# _____	Fee Pd. _____
(\$250.00)	
Reviewed by the _____ Planning Commission	
Staff Recommendation: For _____ Against _____	
Planning Commission Action: Approved _____ Denied _____	