



DEVELOPMENT SERVICES
 700 NORTH GARDEN STREET
 COLUMBIA, TN 38401
 PHONE: (931) 560-1560
 FAX: (931) 560-1541

PLANNING COMMISSION
 PROJECT DEVELOPMENT APPLICATION

SUBMITTAL REQUIREMENTS

** 1 hard copy of all materials for submittal + PDF copy of submittal on USB thumb drive or CD
 Fold hard copy submittals larger than 8½"x11"*

ADDRESS/LOCATION	Forrest Drive, Columbia, TN		
	TAX MAP:112	GROUP:	PARCEL:006.00
SUMMARY OF NATURE OF REQUEST AND WORK	Approval to create 34 residential lots and dedicate right-of-way.		

REQUEST DATE FOR PRE-APPLICATION CONFERENCE		<i>Pre-application meetings are scheduled for Wednesdays.</i>
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SELECT REQUEST <input type="checkbox"/> Annexation <input type="checkbox"/> Rezoning <input type="checkbox"/> Sketch Plat – <i>Must be submitted at least two weeks prior to Preliminary Plat submittal</i> <input type="checkbox"/> Preliminary Plat <input checked="" type="checkbox"/> Final Plat <input type="checkbox"/> PUD Preliminary Master Plan <input type="checkbox"/> PUD Final Site Plan <input type="checkbox"/> Multi-Family Site Plan <input type="checkbox"/> Other: _____ <i>*File naming nomenclature examples:</i> <i>Freedom Point Site Plan</i> <i>Freedom Point Master Plan</i> <i>Freedom Point Final Plat</i> <i>Freedom Point Elevations</i>	SUBMITTALS SHALL INCLUDE BUT NOT LIMITED TO: <u>Annexations/Rezoning:</u> <input type="checkbox"/> Written Legal Description copy <input type="checkbox"/> Requested Zone Listed <input type="checkbox"/> Compliance with Comprehensive Plan <input type="checkbox"/> Annexation Permission Form <input type="checkbox"/> Plans and/or Plats conforming to City standards <u>Plats/PUDs:</u> <ul style="list-style-type: none"> Project Name (include Sections & Phases) Morgan Meadows, Phase 2 Total Number of Lots 34 Total acreage ±19.82
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Applications and all required submittals must be filed with the Department of Development Services prior to the established deadline. Both the applicant and property owner (if different from applicant) must sign the application.

APPLICANT

All communications go to the Applicant's email that is provided.

NAME	Allen B. O'Leary	PHONE	931-388-2329
ADDRESS	2486 Nashville Hwy, Columbia, TN	EMAIL	allen@wesengineers.com

PROPERTY OWNER NAME	KCS Property LLC	PHONE	931-490-9782
ADDRESS	P.O. Box 1939, Columbia, TN	EMAIL	wade@kcsllc.com

In filling out this application, I attest that (1) I am familiar with the rules, regulations, and procedures of the City of Columbia & (2) all information contained herein is accurate & true to the best of my knowledge.

Allen O'Leary
 APPLICANT NAME


 APPLICANT SIGNATURE

3/21/22
 DATE

KCS Property LLC Wade Kincaid
 PROPERTY OWNER NAME


 PROPERTY OWNER SIGNATURE

3/7/2022
 DATE

STAFF USE ONLY

DOCKET NO.		FEE PAID	
RECEIPT NO.		REQUESTED AGENDA	

DATE NOTICES SENT TO ADJACENT PROPERTY OWNERS	
DATE OF PUBLIC NOTICES IN DAILY HERALD	

BOARD ACTION	
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