



PLANNING COMMISSION
PROJECT DEVELOPMENT APPLICATION
DEADLINE: 3RD MONDAY OF THE MONTH AT 4:00 PM

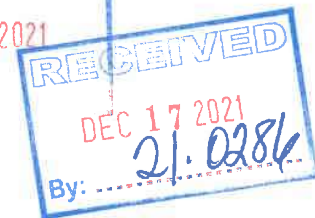
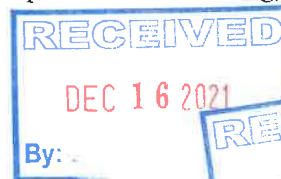
ADDRESS/LOCATION	<i>E 7th Street</i>		
	TAX MAP: <i>99A</i>	GROUP: <i>G</i>	PARCEL: <i>5,6,7,8</i>
SUMMARY OF NATURE OF REQUEST AND WORK	<i>Preliminary Plat</i>		

REQUEST DATE FOR PRE-APPLICATION CONFERENCE	<i>3-3-21</i>	<i>Pre-application meetings are scheduled for Wednesdays between 8 and 10 am. Meeting must be requested by Monday of the same week.</i>
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SUBMITTAL REQUIREMENTS
25 copies of plan + PDF
Fold all submittals larger than 8½" x 11"

SELECT REQUEST	PLAN SHALL INCLUDE
<input type="checkbox"/> Annexation <input type="checkbox"/> Annexation & Rezoning <input type="checkbox"/> Rezoning <input type="checkbox"/> Sketch Plat – <i>Must be submitted at least two weeks prior to Preliminary Plat submittal</i> <input checked="" type="checkbox"/> Preliminary Plat <input type="checkbox"/> Final Plat <input type="checkbox"/> PUD Master Plan <input type="checkbox"/> PUD Final Plan <input type="checkbox"/> Multi-Family Site Plan <input type="checkbox"/> Other: _____	<u>Annexations/Rezoning:</u> <ul style="list-style-type: none"> • Written Legal Description required • Requested zone • Compliance with Comprehensive Plan <i>Additional public notice is required for comprehensive plan amendments. See meeting schedule for dates.</i> • Annexation Permission Form <u>Plats/PUDs:</u> <ul style="list-style-type: none"> • Project Name (include Sections & Phases) • Total Number of Lots • Total acreage

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. A representative for the project is required to be present at the meeting, at the request of the Commission.



APPLICANT

NAME	Chapdelaine & Assoc	PHONE	615-799-8104
ADDRESS	7376 Walker Road	EMAIL	Chapsurveyors@msn.com

PROPERTY OWNER

NAME	Habitat For Humanity	PHONE	615-690-8090
ADDRESS	109 Nash Dr Franklin, TN 37064	EMAIL	kgalland@hfhwm.org

Williamson; Maury

*bmoore
ehfhwm.org*

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.

Jamie Norvell
APPLICANT NAME


APPLICANT SIGNATURE

12/15/21
DATE

* Zoning Ordinance Article 3.3.3. Applications will be reviewed for completeness within 5 days of submittal. Incomplete applications will be removed and the applicant will be notified by certified mail listing incomplete information.*

Jennee Galland
PROPERTY OWNER NAME


PROPERTY OWNER SIGNATURE

12/15/21
DATE

STAFF USE ONLY

DOCKET NO.	21-0286	FEE PAID	
RECEIPT NO.		REQUESTED AGENDA	
DATE NOTICES SENT TO ADJACENT PROPERTY OWNERS			
DATE OF PUBLIC NOTICES IN DAILY HERALD			
BOARD ACTION			

Receipt Date: 12/17/2021

City Of Columbia

700 North Garden Street
Columbia, TN 38401
(931) 560-1500

Receipt Number: 10071208

Miscellaneous Receipt

Name: CHAPDELAINE & ASSOCIATES

Code: 206-ZONING PERMITS AND FEES

Amt: \$60.00

MR #: 10056493

Description: PRELIMINARY PLAT

Reference: EAST 7TH STREET LOT 3

Notes:

GL Account	Description	Amount
110-32660-	Zoning Permits & Fees	60.00

Payment Information

Check	1679	\$60.00	Paid By: CHAPDELAINE & ASSOCIATES
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Amount Tendered:	\$60.00
Total Paid:	\$60.00
Change:	\$0.00

Voided

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