



Town of Ashland City

Building & Codes Department

233 Tennessee Waltz Parkway Suite 103
Ashland City TN 37015
(615) 792-6455

ZONING INTERPRETATION AND DETERMINATION APPLICATION

Property Owner: _____ Phone: _____

Address: _____

Suite/Apt: _____

Property Address: _____

Map # _____ Parcel #: _____

Applicant: _____ Phone: _____

Address: _____

Description of existing use and site: (Include as much detail as possible)

Description of proposed project and use: (Include as much detail as possible)

If the applicant is not the property owner a notarized statement designating a legally authorized agent is required before application approval or issuance of a permit.

Signature: _____ Date: _____

Submit Application to:

amartin@ashlandcitytn.gov



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Submit together with applicable evidence of:

_____ Preliminary Site Plan (Sketch drawing may be acceptable for zoning interpretation and review application)

_____ Notarized representative statement

This Zoning Review Application is for the purpose of reviewing proposed projects for compliance with the zoning ordinances. Based on a review of this application, additional materials may be required before making application to the Planning Commission.

Staff comments will be completed and available to the application within ten (10) days, excluding holidays.