CITY OF
COLUMBIA
TENNESSEE

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

PROJECT DEVELOPMENT APPLICATION

DEADLINE: 3RD MONDAY OF THE MONTH AT 4:00 PM

ADDRESS/LOCATION			
	TAX MAP:	GROUP:	PARCEL:
SUMMARY OF NATURE OF WORK			

DATE OF PRE-APPLICATION CONFERENCE	

PLANNING COMMISSION

Check Request

- ❑ Annexation
- ❑ Annexation & Rezoning
- ❑ Rezoning
- ❑ Sketch Plat
- ❑ Preliminary Plat
- ❑ Final Plat
- ❑ PUD Master Plan
- ❑ PUD Final Plan
- ❑ Other:

Submittal Requirements: 25 copies of plan/plan + PDF

Annexations/Rezoning-

- Written Legal Description required
- Requested zone
- Complies with Comprehensive Plan?

Plats/PUDs:

- Project Name (include Sections & Phases
- Total Number of Lots
- Total acreage

ARCHITECTURAL REVIEW TEAM

Check Request

- ❑ Façade Approval
- ❑ Large-scale Commercial Approval
- ❑ Alternative Compliance Requested
- ❑ Other:

Submittal Requirements: 10 copies of submittal + PDF

- Site Plan
- Building elevations for <u>all sides</u> of the building: Color elevations, required, at legible scale, with all materials listed (materials board may be required)
- If Alternative Compliance is requested, provide scope of alternative and description of proposed compliance.

STORMWATER ADVISORY COMMITTEE

Check Request

- ❑ Appeal
- ❑ Variance For:
- ❑ Other:

Submittal Requirements: 10 copies of submittal + PDF

- Map
- Plan
- Photographs
- Other Information

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.

*FOLD ALL SUBMITTALS LARGER THAN 8½"x11"

APPLICANT

NAME		PHONE	
ADDRESS		EMAIL	

PROPERTY OWNER

NAME		PHONE	
ADDRESS		EMAIL	

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.

APPLICANT NAME	APPLICANT SIGNATURE	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.*

PROPERTY OWNER NAME	PROPERTY OWNER SIGNATURE	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	