Zoning Request Application
Under the Blount County Zoning Regulations

Department of Development Services
1221 McArthur Road Maryville, TN 37804
Phone: 865-681-9301 Fax: 865-681-9502

Tax Map/Parcel: ___________ Site Address: ________________________________
Owner: ________________________________ Phone: __________________________
Mailing Address: ________________________________

City ___________________ State ___________ Zip Code ______________________

Type of Permit:
Appeal ___ Rezoning ___ Special Exception ___ Variance ___ Co-Locate ___ Tower _____
Zone _________ Size of lot _____________

Notes: _____________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

I, the undersigned being the owner of the property described above, affirm the accuracy of the
above information about the property and any proposed structures and uses described. I
further acknowledge that it is my responsibility to ensure that such requirements are met during
construction of any proposed structure. By my signature, I also give permission for inspection of
the property by an authorized agent of Blount County Government for the purpose of enforcing
the Zoning Regulations set forth by the Blount County Commission.

_________________________________________ _________________________
Owner Signature Date

Fee: _______________ Receipt #: _______________
Approval Signature: ___________________________ Date: ____________________