

**CITY OF SHELBYVILLE, TENNESSEE**

**PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT**

**SITE PLAN APPLICATION**

**PLEASE NOTE:** Failure to complete the process below will result in an incomplete application. Applications will not be considered until all items are submitted.

A complete application consists of the following submitted to the Planning and Community Development Department (PCD) in accordance with the approved Submittal Calendar to be placed on the current month's agenda:

1. Completion of this application;
2. Submittal of site plans:
  - 1 hard copy mailed to: Shelbyville Power Water & Sewerage, 308 South Main Street, Shelbyville, TN 37160 (attention: John Freeman)
  - PDF of Site Plans and Supporting Documentation emailed to [planning@shelbyvilletn.org](mailto:planning@shelbyvilletn.org)
3. Application fee submitted via cash or check to the City of Shelbyville. Please make checks payable to the City of Shelbyville.

Please note that all property owners of record must be listed below. If there are additional Owners of Record, please provide their information on another sheet and attach to this application. Married individuals may be listed on this form as one property owner.

**Name:** \_\_\_\_\_

**Address (no P.O. Box Numbers):** \_\_\_\_\_

**Phone Number:** (     ) \_\_\_\_\_

**Email:** \_\_\_\_\_



**Name:** \_\_\_\_\_

**Address (no P.O. Box Numbers):** \_\_\_\_\_

**Phone Number:** (     ) \_\_\_\_\_

**Email:** \_\_\_\_\_

**PROPERTY OWNER'S REPRESENTATIVE** – This person shall serve as the applicant on behalf of the Property Owner(s) listed on this application. This person shall serve as the City of Shelbyville's primary contact during the review process. The Property Owner(s) agree that this person shall have the full authority to speak to and make representations to City staff about the project on behalf of the Property Owner(s).

**Name:** \_\_\_\_\_

**Address (no P.O. Box Numbers):** \_\_\_\_\_

**Phone Number:** (        ) \_\_\_\_\_

**Email:** \_\_\_\_\_

Property Information

Property Address (if not numbered, nearest major cross streets): \_\_\_\_\_

Tax Map and Parcel Number(s): \_\_\_\_\_

Total Acreage of Property: \_\_\_\_\_

Current Total Lot Coverage: \_\_\_\_\_

Current Zoning of Property: \_\_\_\_\_

<sup>1</sup>Utility Providers (Check All That Apply):    SPWS        BCUD        DRE        Atmos

Current Use of Property (Check One):    Residential    Commercial    Industrial    Vacant

Project Information

Proposed Building Square Footage: \_\_\_\_\_ If addition, total resulting square footage? \_\_\_\_\_

Proposed Building Height: \_\_\_\_\_ Multi-Tenant? \_\_\_\_\_ How many? \_\_\_\_\_

Activity Description (e.g., restaurant, retail, manufacturing, distribution):

\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> SPWS: Shelbyville Power, Water, and Sewerage

BCUD: Bedford County Utility District

DRE: Duck River Electric

**REQUIRED SIGNATURES**

Property Owner Signature and Date \_\_\_\_\_

Property Owner Signature and Date \_\_\_\_\_

Property Owner's **Representative** Signature and Date \_\_\_\_\_

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**IMPORTANT DATES**

**Date and Time of Pre-Planning Meeting:** \_\_\_\_\_ at 2:00 PM

Recreation Centre, Meeting Room B, 220 Tulip Tree Road

**Date and Time of Planning Commission Meeting:** \_\_\_\_\_ at 6:00 PM

Recreation Centre, Meeting Room B, 220 Tulip Tree Road

**For Office Use Only**

**Date Application Received:**

**Received By:**

**Amount of Fee Received:**

**Date Fee Received:**

**Review Type:** *Administrative*

*Planning Commission*

**Status of Review:**

**Date Status Notification Letter Sent to Property Owner(s):**