

**CITY OF LA VERGNE  
PLAN REVIEW APPLICATION**

For Staff Use Only
<b>Project Name:</b> _____ <b>Date:</b> _____ <b>Fee:</b> _____

**Please submit Application Forms in person to the  
City of La Vergne Codes Building Front Desk/City Planner**

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Land Use Existing: \_\_\_\_\_

Land Use Proposed: \_\_\_\_\_

Existing Zoning District \_\_\_\_\_

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

**Check one or more of the following:**

- |   |  |
|---|--|
| <input type="checkbox"/> Concept Plan for Major Subdivision                 | <input type="checkbox"/> Site Plan                 |
| <input type="checkbox"/> Preliminary Subdivision Plat for Minor Subdivision | <input type="checkbox"/> Variance*                 |
| <input type="checkbox"/> Preliminary Subdivision Plat for Major Subdivision | <input type="checkbox"/> Rezoning*                 |
| <input type="checkbox"/> Final Subdivision Plat for Minor Subdivision       | <input type="checkbox"/> Road or alley abandonment |
| <input type="checkbox"/> Final Subdivision Plat for Major Subdivision       | <input type="checkbox"/> Special Exception*        |
| <input type="checkbox"/> Final Subdivision Plat for Condominium             |  |

\*These requests require an additional application form.

**\*\*\*\*NOTE: A letter explaining the proposal must accompany all requests.\*\*\*\***

**Environmental Constraints on Site?**

- |   |     |    |
|---|-----|----|
| 1. Are there slopes of 12-20% or greater on site?                     | Yes | No |
| 2. Is the development located in a local regulatory flood plain/zone? | Yes | No |

**Engineer/Designer (if applicable)** Print Name \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail: \_\_\_\_\_

**Attorney (if applicable)** Print Name \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**Contact Person**

Print Name \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

The undersigned has read the application associated with the above listed review request and is familiar with the information submitted herewith. It is agreed and understood that the undersigned will be held responsible for its accuracy. The undersigned warrants their authority to bind the owner and to subject the property to restrictions and conditions that may be attached to the proposed development.

**Applicant (if other than owner)**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_

**Owner(s)**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Phone \_\_\_\_\_

# Certification Statement

I hereby certify that \_\_\_\_\_ is the owner of the property located at \_\_\_\_\_ which is the subject of this application, and that I, \_\_\_\_\_, in my capacity as \_\_\_\_\_, am authorized to sign this application on behalf of the owner.

I understand that knowingly providing false information on this Application may result in any action taken heron being declared null and void. I further understand that pursuant to TCA 39-16-301 et seq., knowingly making a material false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his duty is punishable as a Class B misdemeanor.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**Note:** A Certification Statement must be submitted with an application form requiring the owner's signature if the owner of the subject property is a corporation, limited liability company, partnership, association, trustee, etc., or if someone other than the owner signs the application. All Certification Statements **must** be notarized.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Date