



City of Friendsville

213 W. College Avenue
P.O. Box 56
Friendsville, TN 37737
Ph: (865)995-2831 Fax: (865) 995-9878

A place where friends gather.

Zoning Request Application

Under the Blount County Zoning Regulations

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:

Owner Signature

Date:

Office use only	
Fee: _____	Residence _____ Commercial _____
Receipt #: _____	Check# _____ Credit Card _____ Cash _____
Approval Signature: _____	Date: _____