Planning KNOXVILLE I KNOX COUNTY
Schaad Companies, LLC

**Development Request** 

15 W 27.	23
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Planning KNOXVILLE I KNOX COUNTY		DEVELOPMENT  ☐ Development Plan ☐ Planned Development ☐ Use on Review / Special Use ☐ Hillside Protection COA		SUBDIVISION  ☐ Concept Plan ☐ Final Plat		ZONING Plan Amendment SP OYP Rezoning		
Schaad Compan	ies, LLC			BCM 11-27-23 Owner				
Applicant Name 3CM 13		January 11	,2024	PC	Affiliatio	on		
11-27-2023 10-30-2023	11.60	December 14, 202	23			F	ile Number(s)	
Date Filed		Meeting Date (if appli	icable)			23-RZ 24-PA 24-SP		
CORRESPONDE	NCE All o	orrespondence related to this	application s	hould be dire	cted to the ap	proved contac	t listed below.	
■ Applicant □	Property Owner	☐ Option Holder ☐ Pro	ject Surveyor	r 🗌 Engine	eer 🗌 Archi	tect/Landscape	e Architect	
Benjmain C. Mu	llins		Frantz	z, McConne	ell & Seymo	ur, LLP		
Name			Compa	ny				
550 West Main	Street, Suite 5	00	Knoxy	/ille	TN	37	902	
Address			City		State	ZIP	11.00	
865-546-9321		bmullins@fmsllp.	.com					
Phone		Email						
CURRENT PROP	PERTY INFO							
Schaad Comp	oanies, LLC	5820 Walden Dr., Suite 102		865-637-2674		674		
Property Owner Na	me (if different)	Property Ow	ner Address			Property Ow	ner Phone	
2000 Shoppers I	-N			093FB00	906			
Property Address		Parcel ID						
KUB		KU	В				N	
Sewer Provider		Wat	ter Provider			11/4	Septic (Y/N)	
STAFF USE ONL	Y							
S of Western Av	e. at the easte	ern terminus of Shoppers	Ln.		~4.04	ac		
General Location					Tract Si	ze		
	3	I-MU		WS				
■ City ☐ County	District	Zoning District		Existing I	and Use			
Northwest City		GC				/ Limits		
Planning Sector		Sector Plan Land Use	Sector Plan Land Use Classification		Growth	Growth Policy Plan Designation		

DEVELOPMENT REQUEST			elated City Permit Number	
☐ Development Plan ☐ Use on Review / Special Use ☐ Hillside Prot	Use Hillside Protection COA			
☐ Residential ☐ Non-Residential				
Iome Occupation (specify)	_		i.	
Other (specify)				
SUBDIVISION REQUEST				
		R	elated Rezoning File Numb	
roposed Subdivision Name				
☐ Combine Parcels ☐ Divide Parcel				
Init / Phase Number Total	Number of Lots C	reated		
Other (specify)				
Attachments / Additional Requirements				
ZONING REQUEST				
Zoning Change CH1 I - 6 B(M 11-27-23	3		Pending Plat File Number	
Proposed Zoning  1 - 27-2	9			
Plan Amendment Change 4.1 BCM 11-27-2	25			
Proposed Plan Designation(s)				
Proposed Density (units/acre) Previous Rezoning Requests	5			
Other (specify)				
STAFF USE ONLY				
PLAT TYPE	Fee 1		Total	
☐ Staff Review ☑ Planning Commission	0803	\$1000.0	\$ <del>1,000.00</del>	
ATTACHMENTS		Ψ1000.	\$2050.00	
Property Owners / Option Holders	Fee 2			
ADDITIONAL REQUIREMENTS	0605	\$1050.0	00	
Design Plan Certification (Final Plat)				
_				
Use on Review / Special Use (Concept Plan)	Fee 3			
	ree 3	1		
☐ Traffic Impact Study	ree 3			
☐ Use on Review / Special Use (Concept Plan) ☐ Traffic Impact Study ☐ COA Checklist (Hillside Protection)  AUTHORIZATION	ree 3			
☐ Traffic Impact Study ☐ COA Checklist (Hillside Protection)  AUTHORIZATION ☐ I declare under penalty of perjury the foregoing is true and correct:  1) He/she/it is the owner of the property AND 2) The application and all association.		eing submitted	l with his/her/its consent	
Traffic Impact Study COA Checklist (Hillside Protection)  AUTHORIZATION  I declare under penalty of perjury the foregoing is true and correct:	ated materials are b	eing submitted	with his/her/its consent	
Traffic Impact Study COA Checklist (Hillside Protection)  AUTHORIZATION  I declare under penalty of perjury the foregoing is true and correct:  1) He/she/it is the owner of the property AND 2) The application and all association and substitution of the property AND 2. Schaad Companion of the property AND 2. Schaad Companion of Schaad Companion	ated materials are b	eing submitted		
Traffic Impact Study COA Checklist (Hillside Protection)  AUTHORIZATION  I declare under penalty of perjury the foregoing is true and correct: 1) He/she/it is the owner of the property AND 2) The application and all associonocusigned by:  Jamus S. Schaad Companional Schaad Companional Signature  OF38E385A5144B9  Applicant Signature  Please Print	ated materials are b	eing submitted	10-30-2023	
Traffic Impact Study COA Checklist (Hillside Protection)  AUTHORIZATION  I declare under penalty of perjury the foregoing is true and correct: 1) He/she/it is the owner of the property AND 2) The application and all association and all associatio	ated materials are b	eing submitted	10-30-2023 Date	
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