

## CITY OF KNOXVILLE CLOSURE OF PUBLIC RIGHT-OF-WAY

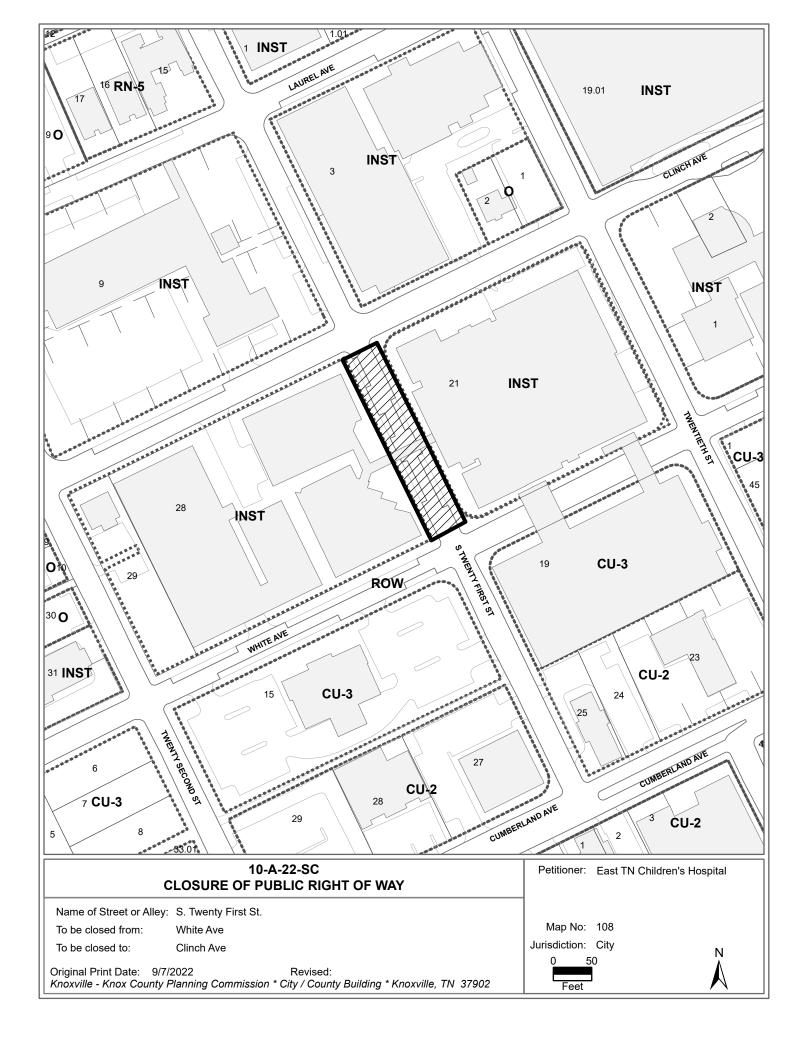
| FILE #: 10-A-22-SC            |                                                | AGENDA ITEM #:                                   | 5                |
|-------------------------------|------------------------------------------------|--------------------------------------------------|------------------|
| POSTPONEMENT(S):              | 10/6/2022, 11/10/2022, 12/8/2022,<br>1/12/2023 | AGENDA DATE:                                     | 2/9/2023         |
| APPLICANT:                    | EAST TN CHILDREN'S HOSPITAL                    |                                                  |                  |
| TAX ID NUMBER:                | 108 C B 021                                    | <u>View ma</u>                                   | p on KGIS        |
| JURISDICTION:                 | Council District 1                             |                                                  |                  |
| SECTOR PLAN:                  | Central City                                   |                                                  |                  |
| GROWTH POLICY PLAN:           | N/A (Within City Limits)                       |                                                  |                  |
| ZONING:                       | INST (Institutional)                           |                                                  |                  |
| WATERSHED:                    | Third Creek                                    |                                                  |                  |
| RIGHT-OF-WAY TO BE<br>CLOSED: | S. Twenty First St.                            |                                                  |                  |
| LOCATION:                     | Between White Ave and Clinch Ave               |                                                  |                  |
|                               |                                                |                                                  |                  |
| IS STREET:                    |                                                |                                                  |                  |
| IS STREET:<br>(1) IN USE?:    | Yes                                            |                                                  |                  |
|                               | Yes<br>Yes                                     |                                                  |                  |
| (1) IN USE?:                  |                                                | owner on either side of pedestrian traffic cross | the<br>sing this |

#### **STAFF RECOMMENDATION:**

Withdraw closure as requested by the applicant.

If approved, this item will be forwarded to Knoxville City Council for action on 3/7/2023 and 3/21/2023. If denied, Knoxville-Knox County Planning Commission's action is final, unless the action to deny is appealed to Knoxville City Council. The date of the appeal hearing will depend on when the appeal application is filed. Appellants have 15 days to appeal a Planning Commission decision in the City.

| AGENDA ITEM #: 5 | FILE #: 10-A-22-SC | 2/2/2023 11:46 AM | LIZ ALBERTSON | PAGE #: | 5-1 |
|------------------|--------------------|-------------------|---------------|---------|-----|



# **Request to** Postpone · Table · Withdraw



#### East TN Children's Hospital

#### 1/5/2023

File Number(s)

| Applicant Name (as it appears on the cu | rrent Planning Commission agenda) | Date of Request |
|-----------------------------------------|-----------------------------------|-----------------|
|-----------------------------------------|-----------------------------------|-----------------|

#### January 12, 2023

Scheduled Meeting Date

#### 10-A-22-SC

#### POSTPONE

**POSTPONE:** All applications are eligible for postponement if the request is received in writing and paid for by noon on Thursday the week prior to the Planning Commission meeting. All requests must be acted upon by the Planning Commission, except new applications which are eligible for one 30-day automatic postponement. If payment is not received by the deadline, the item will be tabled.

| SELECT ONE: 🔳 30 days 🗌 60 days             |          |                              |
|---------------------------------------------|----------|------------------------------|
| Postpone the above application(s) until the | February | Planning Commission Meeting. |

#### WITHDRAW

□ WITHDRAW: Applications may be withdrawn automatically if the request is received in writing no later than noon on Thursday the week prior to the Planning Commission meeting. Requests made after this deadline must be acted on by the Planning Commission. Applicants are eligible for a refund only if a written request for withdrawal is received prior to public notice and the request is approved by the Executive Director or Planning Services Manager. \*The refund check will be mailed to the original payee.

#### TABLE

**TABLE:** Any item requested for tabling must be acted upon by the Planning Commission before it can be officially tabled. There is no fee to table or untable an item.

| AUTHORIZATION | By signing below, I certify I am the property owner, and/or the owners authorized representative. |
|---------------|---------------------------------------------------------------------------------------------------|
|---------------|---------------------------------------------------------------------------------------------------|

| Taylor D. Forrester      | Digs ally signed by Tayler D. Formene<br>Dirk om Fugler D. Formenerge an Tayler D. Formeser o-UIS United States F-UIS United States on Thomeser @Halam.com<br>Reason: United States of a document<br>Location:<br>District 2021 - H 2: 16.27-04.03 | Taylor D. Forrester |           |          |
|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------|----------|
| Applicant Signature      |                                                                                                                                                                                                                                                    | Please Print        |           |          |
| 865-584-4040             |                                                                                                                                                                                                                                                    | TForrester@lrwlaw.  | com       |          |
| Phone Number             |                                                                                                                                                                                                                                                    | Email               |           |          |
| STAFF ONLY               |                                                                                                                                                                                                                                                    |                     |           |          |
| Staff Signature          | Pleas                                                                                                                                                                                                                                              | e Print             | Date Paid | 🗌 No Fee |
| Eligible for Fee Refund? | Yes No Amount:                                                                                                                                                                                                                                     |                     |           |          |
| Approved by:             |                                                                                                                                                                                                                                                    | Date:               |           |          |
| Pavee Name               | Pavee Phone                                                                                                                                                                                                                                        | Pavee Add           | ress      |          |



# Memo

#### AUGUST 31, 2022

Knoxville Utilities Board Steve Borden, Regional Director, TN Dept. of Transportation Harold Cannon, Director, Department of Engineering Steve King, Department of Engineering Sonny Partin, Fire Marshall Shannon Sims, AT&T James W. Wagner, AT&T Ben Davidson, Department of Engineering Charlotte Goforth, Department of Engineering

From: Michelle Portier, Principal Planner, Knoxville-Knox County Planning

# RE: REQUEST CLOSURE OF A SECTION OF S. TWENTY FIRST ST. BETWEEN CLINCH AVE. AND WHITE AVE. (10-A-22-SC)

Please give us the following information in writing regarding this proposed closure, adding any conditions you wish considered with this request:

- 1 Is there any present or anticipated future need for this street/alley which in your opinion would warrant retaining it for public use?
- 2 What present use does it serve?
- **3** What future use is anticipated?
- 4 If closed (vacated), would easements meet your needs?
- 5 If easement will meet needs, please state easements required.
- 6 If your department opposes vacating the ROW, please indicate the rationale.

This request will be considered by the Knoxville-Knox County Planning Commission on October 6, 2022. A map showing the street or alley in question is attached for your information.

## PLEASE NOTE: Failure to reply to our office by Monday, September 19, 2022 will be considered as no objection by your agency.

C: Amy Brooks, Executive Director, Knoxville-Knox County Planning Attachment: Application





Dori Caron <dori.caron@knoxplanning.org>

#### URGENT: 10-A-22-SC KFD comments?

Sonny Partin <spartin@knoxvilletn.gov> Tue, Dec 6, 2022 at 10:50 AM To: Dori Caron <dori.caron@knoxplanning.org>, Liz Albertson <liz.albertson@knoxplanning.org>

Yes, we have approved the closure and asked them to resubmit with the changes we agreed upon.



Asst. Chief Sonny Partin, CFPS Fire Marshal Knoxville Fire Dept 400 Main St. Suite 446 Knoxville, TN 37902 (865) 215-2283 Work

From: Dori Caron <dori.caron@knoxplanning.org> Sent: Tuesday, December 6, 2022 10:22 AM To: Liz Albertson <liz.albertson@knoxplanning.org> Cc: Sonny Partin <spartin@knoxvilletn.gov> Subject: Re: URGENT: 10-A-22-SC KFD comments?

Sonny,

Me again! We have updated the staff report noting that fire does not have any objections to this closure but upon checking our emails, we can't find yours on this one! Can I trouble you resend it so we have it for our records? Thank you!

Dori Caron

Senior Administrative Assistant

Direct Line: 865-215-2694

Email: dori.caron@knoxplanning.org

Knoxville - Knox County Planning Mail - URGENT: 10-A-22-SC KFD comments? Knoxville-Knox County Planning | Knoxville Regional TPO

400 Main Street, Suite 403 | Knoxville, TN 37902

On Tue, Dec 6, 2022 at 9:06 AM Liz Albertson <liz.albertson@knoxplanning.org> wrote:

Hi Sonny -

We're going into our agenda review meeting at 11:30 and the ROW closure for case **10-A-22-SC** will be the first item we discuss. Taylor Forrester, representing ETCH sent me an email saying that KFD is now in support of the closure.

Could you respond to this email and let me know? City Engineering objects to this closure.

Thank you for a quick response.

-Liz Albertson

--

Liz Albertson, AICP

Principal Planner

865-215-3804

liz.albertson@knoxplanning.org

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### CITY OF KNOXVILLE



Engineering Benjamin D. Davidson, PLS Technical Services Administrator

September 19, 2022

Knoxville-Knox Planning City-County Building, Suite 403 Knoxville, Tennessee 37902

SUBJECT: Closure of right-of-way request Planning File # 10-A-22-AC

The City Engineering Department does not support closure of this right-of-way due to the traffic volume and layout of other adjacent streets in this busy area neighborhood. Removal of this area of vehicular travel would present a more challenging navigation path than already exists for the community and the varied uses in the vicinity.

Sincerely,

Benjami D. Davider

Benjamin D. Davidson, PLS, Technical Services Administrator Technical Services/Department of Engineering Ph: 865-215-2103



Dori Caron <dori.caron@knoxplanning.org>

#### ROW closure request 10-A-22-SC

**Sonny Partin** <spartin@knoxvilletn.gov> To: Dori Caron <dori.caron@knoxplanning.org> Thu, Sep 29, 2022 at 2:53 PM

Disapproved by fire



Asst. Chief Sonny Partin, CFPS Fire Marshal Knoxville Fire Dept 400 Main St. Suite 446 Knoxville, TN 37902 (865) 215-2283 Work

From: Dori Caron <dori.caron@knoxplanning.org> Sent: Wednesday, August 31, 2022 11:12 AM To: Charlotte Goforth <cgoforth@knoxvilletn.gov>; Steve Borden <steve.borden@tn.gov>; Michelle Portier <<u>michelle.portier@knoxplanning.org</u>>; Christian Wiberley <Christian.Wiberley@kub.org>; Jay B. Frazier <jf092g@att.com>; Chris Howley <chowley@knoxvilletn.gov>; WAGNER, JAMES W <JW904s@att.com>; Steve King <sking@knoxvilletn.gov>; Ben Davidson <bdavidson@knoxvilletn.gov>; Harold Cannon <hcannon@knoxvilletn.gov>; Sonny Partin <spartin@knoxvilletn.gov>; Jessica Kitts <jessica.kitts@knoxplanning.org>; amy.brooks@knoxplanning.org Subject: ROW closure request 10-A-22-SC

Good morning,

One request for October. Thank you!

Dori Caron

Senior Administrative Assistant

Direct Line: 865-215-2694

Email: dori.caron@knoxplanning.org



September 16, 2022

Michelle Portier Knoxville-Knox County Metropolitan Planning Commission Suite 403, City-County Building Knoxville, Tennessee 37902

Dear Ms. Portier:

#### Re: Right-of-Way Closure Requests 10-A-22-SC

We have reviewed our records and find that we have existing utility facilities located within the subject right-of-way. The approximate locations of these facilities are indicated on the enclosed prints. However, KUB does not release and hereby retains all easements and rights for existing utility facilities, whether or not shown on these prints.

Should this right-of-way be closed, KUB will require the following permanent easements for its utility facilities.

Gas - 7.5 feet on each side of the centerline of the gas line, 15 feet total width Sewer - 7.5 feet on each side of the centerline of the sewer line, 15 feet total width Water - 7.5 feet on each side of the centerline of the water line, 15 feet total width

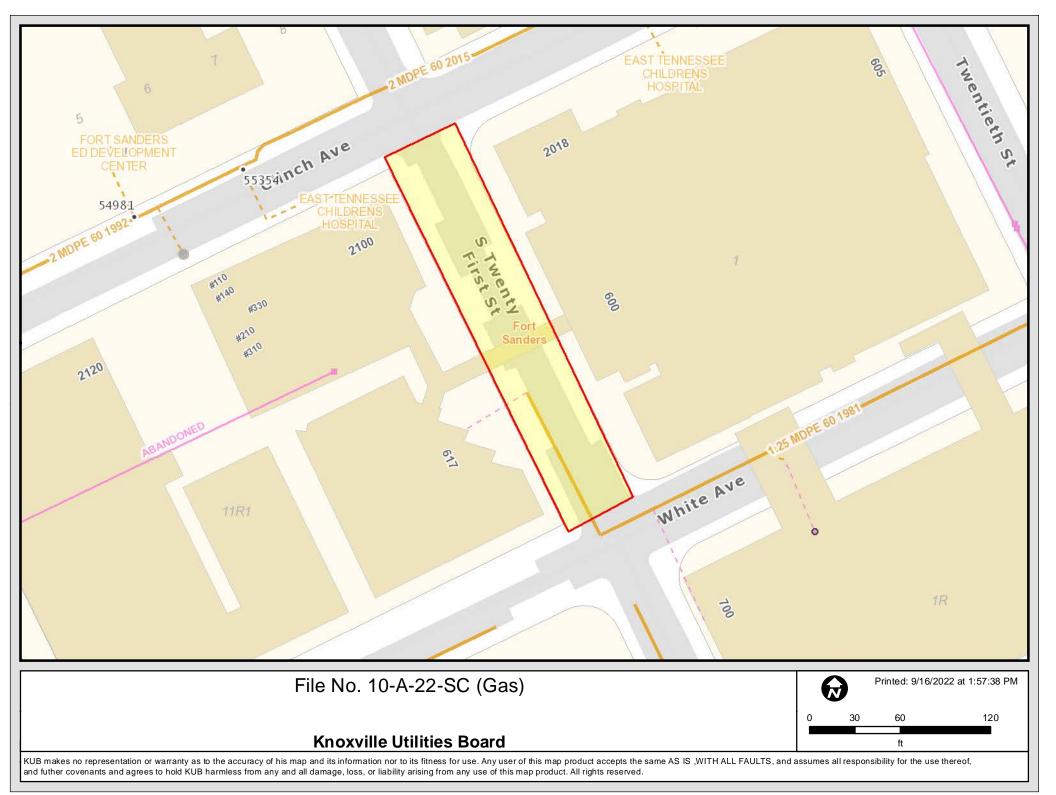
If you have any questions regarding this matter, please call me at (865) 558-2483.

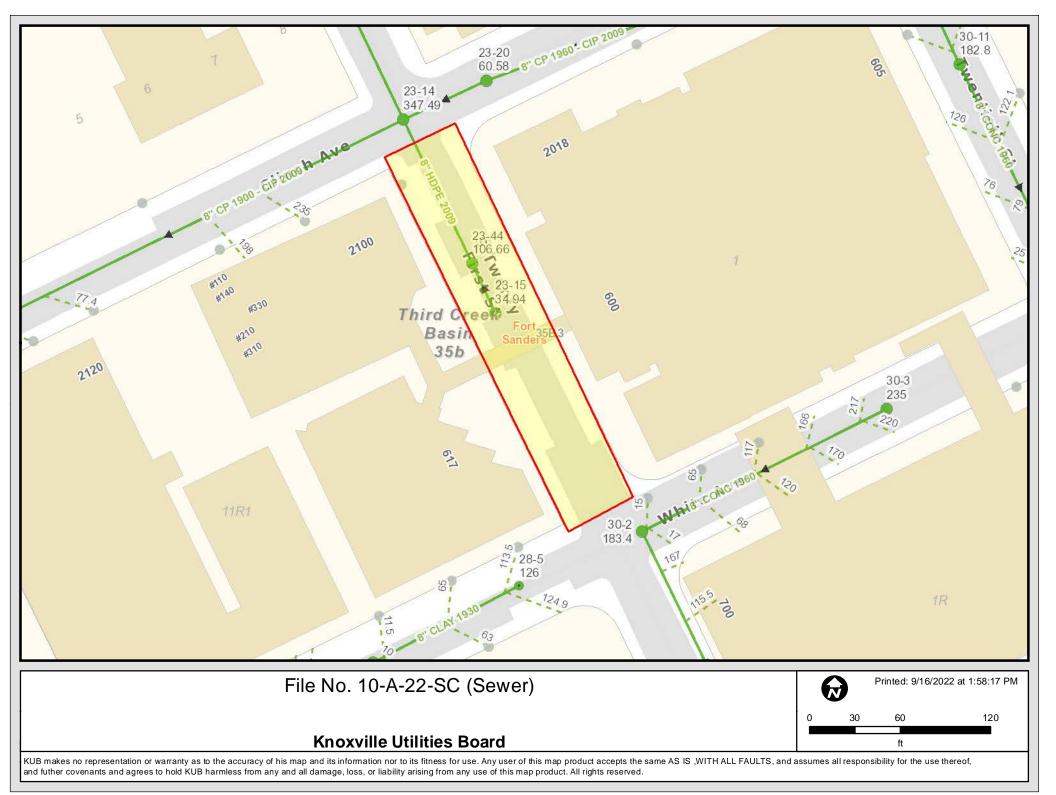
Sincerely,

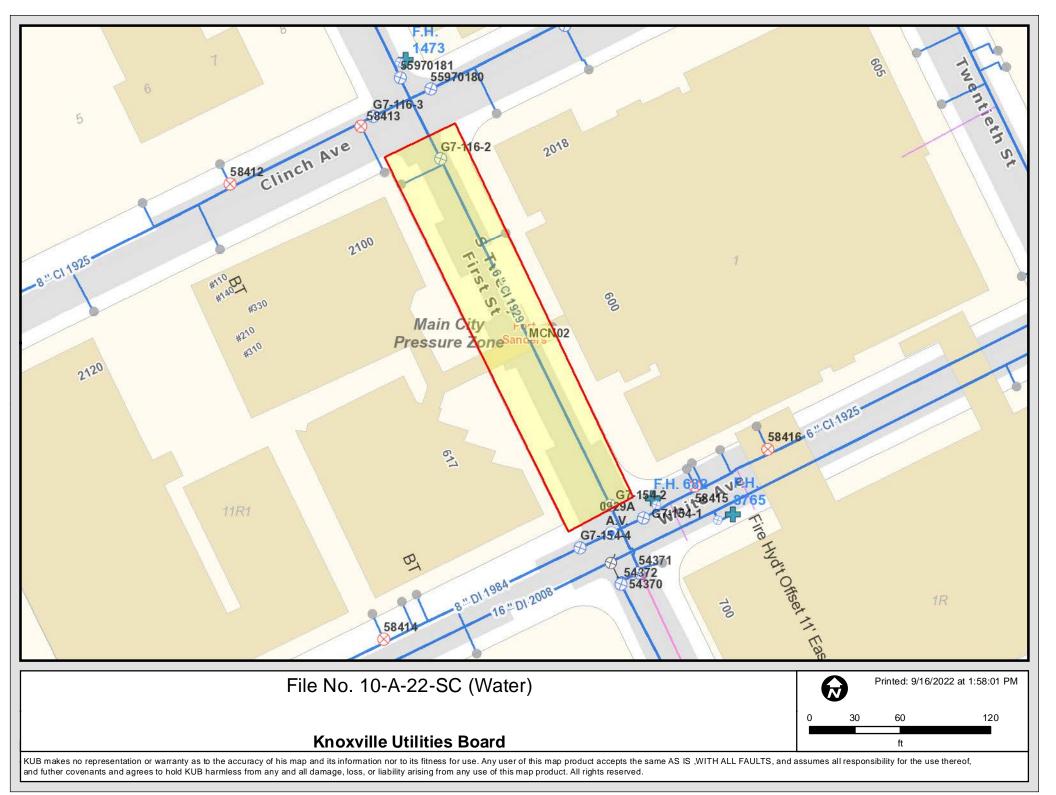
blit Vik

Christian Wiberley, PE Engineering

CGW









Dori Caron <dori.caron@knoxplanning.org>

#### **ROW closure request 10-A-22-SC**

**Steve Borden** <Steve.Borden@tn.gov> To: Dori Caron <dori.caron@knoxplanning.org> Tue, Sep 13, 2022 at 9:40 AM

Dori,

TDOT District 18 Operations has no comments regarding the ROW closure request 10-A-22-SC.

Steve



Steven M. Borden, P.E. | Director/Assistant Chief Engineer

TDOT - Region 1

7345 Region Lane

Knoxville, TN 37914

(865) 594-2400

Steve.Borden@tn.gov

tn.gov/tdot

From: Dori Caron <dori.caron@knoxplanning.org> Sent: Wednesday, August 31, 2022 11:12 AM

To: Charlotte Goforth <cgoforth@knoxvilletn.gov>; Steve Borden <Steve.Borden@tn.gov>; Michelle Portier <michelle.portier@knoxplanning.org>; Christian Wiberley <Christian.Wiberley@kub.org>; Jay B. Frazier <jf092g@att.com>; Chris Howley <chowley@knoxvilletn.gov>; WAGNER, JAMES W <JW904s@att.com>; Steve King <sking@knoxvilletn.gov>; Ben Davidson <bdavidson@knoxvilletn.gov>; Harold Cannon <hcannon@knoxvilletn.gov>; Sonny Partin <spartin@knoxvilletn.gov>; Jessica Kitts <jessica.kitts@knoxplanning.org>; Amy Brooks <amy.brooks@knoxplanning.org>

Subject: [EXTERNAL] ROW closure request 10-A-22-SC

## \*\*\* This is an EXTERNAL email. Please exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email - STS-Security. \*\*\*

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#5



# (P30) Request to

| Postpone | • | Table | • | W | i | tł | ٦d | ra | V | V |
|----------|---|-------|---|---|---|----|----|----|---|---|
|----------|---|-------|---|---|---|----|----|----|---|---|

| Planning                                                             | East TN Children's Hospital                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                             |                                      | 11/3/2022                           |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------|-------------------------------------|
| KNOXVILLE   KNOX COUNTY                                              | Applicant Name (as it appears on the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | current Planning Commission                                 | agenda)                              | Date of Request                     |
| November 10, 2022                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                      | File Number(s)                      |
| Scheduled Meeting Date                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 10-A-22-SC                                                  |                                      |                                     |
| POSTPONE                                                             | ×                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                             |                                      |                                     |
| the week prior to the Planning C                                     | eligible for postponement if the requision meeting. All requests mu<br>for one 30-day automatic postponem<br>days 🔲 90 days                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ist be acted upon by the Pl                                 | anning Commis                        | sion, except new                    |
| Postpone the above application(s) u                                  | December                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Planni                                                      | ng Commission                        | Meeting.                            |
| WITHDRAW                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                      |                                     |
| week prior to the Planning Com<br>Applicants are eligible for a refu | e withdrawn automatically if the rec<br>nission meeting. Requests made afte<br>nd only if a written request for withd<br>tor or Planning Services Manager. *7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | er this deadline must be ac<br>rawal is received prior to p | ted on by the Pl<br>ublic notice and | anning Commission<br>the request is |
| TABLE                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                      |                                     |
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| AUTHORIZATION By sign                                                | ning below, I certify I am the property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | owner, and/or the owners                                    | authorized rep                       | resentative.                        |
| Taylor D. Forrester                                                  | AND INTERNET TO A CONTRACT OF A DESCRIPTION OF A DESCRIPT | . Forrester                                                 |                                      |                                     |
| Applicant Signature                                                  | Please Pri                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | nt                                                          |                                      |                                     |
| 865-584-4040                                                         | TForrest                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | cer@lrwlaw.com                                              |                                      |                                     |
| Phone Number                                                         | Email                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                             |                                      |                                     |
| STAFF ONLY                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |                                      |                                     |
| Mores<br>Staff Signature                                             | Missy Jones<br>Please Print                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (                                                           | - <u>3-2</u> 2<br>Date Paid          | 🗌 No Fe                             |
| Eligible for Fee Refund? 🔲 Yes 🖄                                     | No Amount:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                      |                                     |
| ma                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 11/3/2                                                      |                                      |                                     |
| Approved by:                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Date:                                                       |                                      |                                     |
| Pavee Name                                                           | Pavee Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Pavee Address                                               |                                      |                                     |

February 2022



# **Request to** Postpone • Table • Withdraw

Planning Commission Meeting.

# KNOXVILLE I KNOX COUNTY East TN Children's Hospital 10/3/2022 Applicant Name (as it appears on the current Planning Commission agenda) Date of Request October 6, 2022 File Number(s) Scheduled Meeting Date 10-A-22-SC POSTPONE Interview of the request is received in writing and paid for by noon on Thursday the week prior to the Planning Commission meeting. All requests must be acted upon by the Planning Commission, except new

**POSTPONE:** All applications are eligible for postponement if the request is received in writing and paid for by noon on Thursday the week prior to the Planning Commission meeting. All requests must be acted upon by the Planning Commission, except new applications which are eligible for one 30-day automatic postponement. If payment is not received by the deadline, the item will be tabled.

| SELECT ONE: |  | 30 days | 🔲 60 days | 🔲 90 d | ays |
|-------------|--|---------|-----------|--------|-----|
|-------------|--|---------|-----------|--------|-----|

Postpone the above application(s) until the November

#### WITHDRAW

□ WITHDRAW: Applications may be withdrawn automatically if the request is received in writing no later than noon on Thursday the week prior to the Planning Commission meeting. Requests made after this deadline must be acted on by the Planning Commission. Applicants are eligible for a refund only if a written request for withdrawal is received prior to public notice and the request is approved by the Executive Director or Planning Services Manager. *\*The refund check will be mailed to the original payee.* 

#### TABLE

**TABLE:** Any item requested for tabling must be acted upon by the Planning Commission before it can be officially tabled. There is no fee to table or untable an item.

| AUTHORIZATION By sign                                     | ning below, I certify I am the property | owner, and/or the own | ers authorized repres                                                                                            | entative.                                                                                          |
|-----------------------------------------------------------|-----------------------------------------|-----------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
|                                                           | Taylor D.                               | Forrester             |                                                                                                                  |                                                                                                    |
| Applicant Signature                                       | Please Print                            |                       |                                                                                                                  | namena Anna a an Indonesia (Indonesia) (Indonesia) (Indonesia) (Indonesia) (Indonesia) (Indonesia) |
| 865-584-4040                                              | TForreste                               | er@lrwlaw.com         |                                                                                                                  |                                                                                                    |
| Phone Number                                              | Email                                   |                       |                                                                                                                  |                                                                                                    |
| STAFF ONLY                                                |                                         |                       |                                                                                                                  |                                                                                                    |
| El Alberrant                                              | Elizabeth Albertson                     |                       |                                                                                                                  | 🗌 No Fee                                                                                           |
| Staff Signature                                           | Please Print                            |                       | Date Paid                                                                                                        |                                                                                                    |
| Eligible for Fee Refund? $\square$ Yes $oldsymbol{ abla}$ | No Amount: <b>\$75.00</b>               |                       |                                                                                                                  |                                                                                                    |
| Approved by:                                              |                                         | Date:                 |                                                                                                                  |                                                                                                    |
| Payee Name                                                | Payee Phone                             | Payee Address         | - 11 Mar - 11 |                                                                                                    |



Knoxville, Tennessee 37902

865-215-2500 www.knoxplanning.org

# **RIGHT-OF-WAY CLOSURE**

 Date Filed: 8/22/2022

 Name of Applicant: EAST TN CHILDREN'S HOSPITAL

 Jurisdiction: City Council District 1
 Sector: Central City

 Growth Policy Plan:
 N/A (Within City Limits)

 Zoning District:
 INST (Institutional)

 File Number:
 10-A-22-SC
 Meeting Date:
 10/6/2022

| INFORMATION:                                                                                                        |                                                                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Tax ID: 108 C B 021                                                                                                 | Add'I. Tax ID Info.:                                                                                                                                                                                     |
| Name of Right-of-Way: S. Twenty First St.                                                                           |                                                                                                                                                                                                          |
| Type of Right-of-Way: Street                                                                                        |                                                                                                                                                                                                          |
| Location of Right-Of-Way:                                                                                           |                                                                                                                                                                                                          |
| BETWEEN (City Block or Lot, where appropriate): White Ave                                                           |                                                                                                                                                                                                          |
| AND (City Block or Lot, where appropriate): Clinch Ave                                                              |                                                                                                                                                                                                          |
| Is ROW in use (yes/no)?: yes Is ROW                                                                                 | / improved (e.g. paved) (yes/no)?: yes                                                                                                                                                                   |
| because it is the owner on either side of                                                                           | section of S. Twenty First Street because of safety concerns and of the street. Applicant has a high volume of pedestrian traffic re is also a high volume of pedestrian traffic consisting of students. |
| TO BE CLOSED:                                                                                                       |                                                                                                                                                                                                          |
| From: (Street, Alley, Other)                                                                                        | To: (Street, Alley, Other)                                                                                                                                                                               |
| White Ave                                                                                                           | Clinch Ave                                                                                                                                                                                               |
|                                                                                                                     |                                                                                                                                                                                                          |
|                                                                                                                     |                                                                                                                                                                                                          |
|                                                                                                                     |                                                                                                                                                                                                          |
| ALL CORRESPONDENCE RELATING TO THIS APPL                                                                            | ICATION SHOULD BE DIRECTED TO:                                                                                                                                                                           |
| Taylor D. Forrester Long, Ragsdale and Waters, PC                                                                   |                                                                                                                                                                                                          |
| 1111 N. Northshore Dr. Dr. Suite S-700                                                                              |                                                                                                                                                                                                          |
| Knoxville, TN 37919 Telephone: 865-584-4040                                                                         | Fax: Email: tforrester@Irwlaw.com                                                                                                                                                                        |
| AUTHORIZATION OF APPLICATION:                                                                                       |                                                                                                                                                                                                          |
| I hereby certify that I am the authorized applicant, representing on same, as listed on the next page of this form. | ALL property owners involved in this request or holders of option                                                                                                                                        |
| East Tennessee Children's Hospital East Tennessee Children                                                          | s Signature:                                                                                                                                                                                             |
| 2018 Clinch Ave.                                                                                                    |                                                                                                                                                                                                          |
| Knoxville, TN 37916 Telephone:                                                                                      | Fax: Email:                                                                                                                                                                                              |
| APPLICATION ACCEPTED BY: Andrea Kupfer                                                                              | 9/7/2022 9:01:22 AM                                                                                                                                                                                      |

#### **RIGHT-OF-WAY CLOSURE CANVASS FORM**

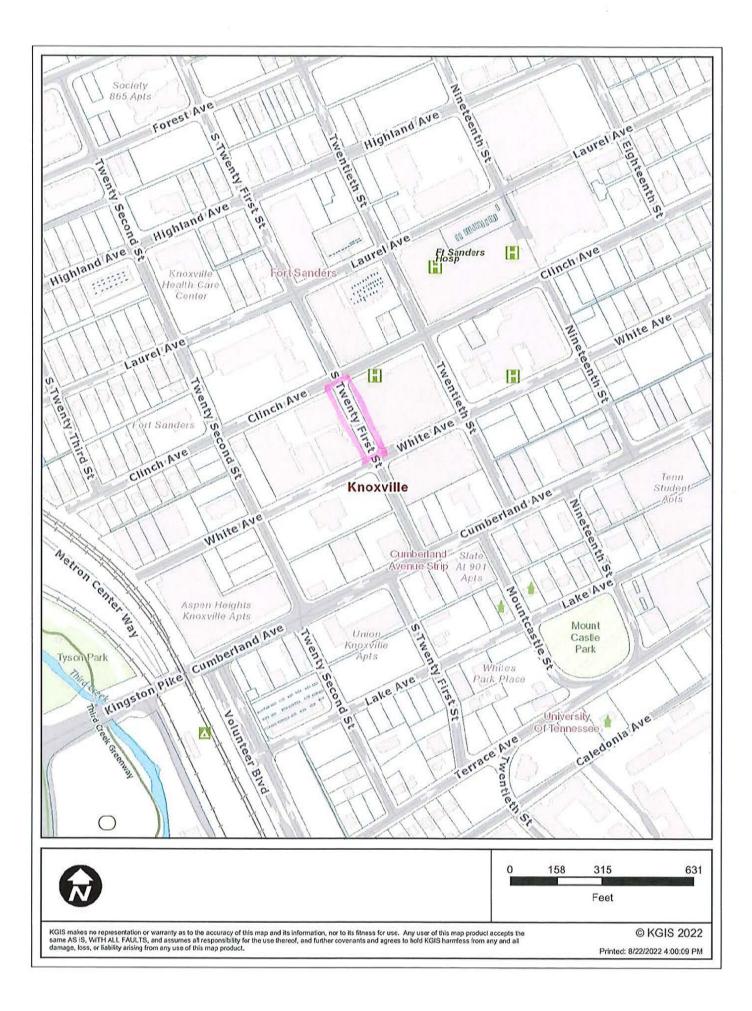
All owners and holders of option on property abutting the proposed closure must sign the list below and express their opinion about this closure. A map showing the location and addresses of these properties must accompany this application.

| Planning Name of Applicant: East Tennessee Children's Hospital                                                      |      |
|---------------------------------------------------------------------------------------------------------------------|------|
|                                                                                                                     |      |
| EXAMPLE I KNOX COUNTY Date Filed: $8 - 22 - 2032$ Fee Paid: $1000$ File Number: $10 - A - 22 - SC$                  |      |
| Map Number: 108 Zoning District: INST 🖾 City 🗆 County Sector : Mu - SD                                              |      |
| Jurisdiction: Dicity 1st Council District Central City                                                              |      |
| INFORMATION:                                                                                                        |      |
| Name of Right-of-Way: S- Twensty First Street                                                                       |      |
| Type of Right-of-Way: Street Alley                                                                                  |      |
| Location of Right-of-Way:                                                                                           |      |
| BETWEEN (City Block or Lot where appropriate)                                                                       |      |
| AND (City Block or Lot where appropriate)                                                                           |      |
| Right-of-Way is: In Use XYes □ No Improved (example: paved) XYes □No                                                |      |
| Reason for Closure: Applicant is requesting the closure of this section of                                          |      |
| S. Twenty First Street (between Clinch Ave and White Ave) because of                                                |      |
| safety concerns and pecause it is the owner on either side of the                                                   |      |
|                                                                                                                     |      |
| street. Applicant has a high volume of pedestiin traffic crossing this                                              |      |
| section of street. These is also high volume pedestrian traffic consisting                                          |      |
| of students.                                                                                                        |      |
| TO BE CLOSED:                                                                                                       |      |
| From: (Street, Alley, Other) To: (Street, Alley, Other)                                                             |      |
| White Ave Clinch Ave                                                                                                |      |
|                                                                                                                     |      |
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|                                                                                                                     |      |
| ALL CORRESPONDENCE RELATING TO THIS APPLICATION SHOULD BE SENT TO:                                                  |      |
| (865)584-4040                                                                                                       |      |
| Taylor D. Forrester - 1111 N. Northshore, Ste S700, KNOXVille, TN 37919 TForresterelry                              | law. |
| Name: (Print) Address • City • State • Zip • Phone • Email                                                          | com  |
|                                                                                                                     |      |
| AUTHORIZATION OF APPLICATION:                                                                                       |      |
| I hereby certify that I am the authorized applicant, or representing the applicant and ALL property owners involved |      |
| in this request or holders of option on same.                                                                       |      |
| Signature:                                                                                                          |      |
|                                                                                                                     |      |
| Laylor D. Forrester 1111 N. Narthoneve Dr. Ste STOO, KNOXVILLE, TN 37519 -(865)584-4040 . TEmestere                 | Irw  |
| Name: (Print) Address • City • State • Zip • Phone • Email                                                          | aw.  |
|                                                                                                                     | or ( |
| APPLICATION ACCEPTED BY: Andrea Kupter                                                                              |      |

#### RIGHT-OF-WAY CLOSURE CANVASS FORM

| All owners and holders of option on property abutting the proposed closure must sign the list below and     |
|-------------------------------------------------------------------------------------------------------------|
| express their opinion about this closure. A map showing the location and addresses of these properties must |
| accompany this application.                                                                                 |

| ADDRESS          | SIGNATURE                       | Agree | Disagree |
|------------------|---------------------------------|-------|----------|
| Applicant is the | owner of the abutting propertie | 2     |          |
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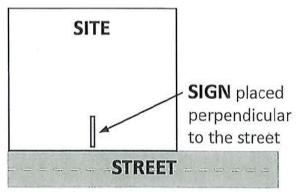




## Sign Posting & Removal Requirement

Revised April 2021

The Administrative Rules and Procedures of the Knoxville-Knox County Planning Commission require a sign to be posted on the property for each application subject to consideration by the Planning Commission, including the following applications: rezoning, plan amendment, concept plan, use on review/special use, planned development, right-ofway closure, and name change.



The required public notice sign(s) will be provided by Planning to the applicant when an application is submitted. If an application is submitted electronically, Planning staff will post the required sign. If a replacement sign(s) is needed, the applicant is responsible for picking up the new sign(s) from Planning and will be charged \$10 for each replacement.

#### LOCATION AND VISIBILITY

The sign must be posted on the nearest adjacent/frontage street and in a location clearly visible to vehicles traveling in either direction. If the property has more than one street frontage, the sign should be placed along the street that carries more traffic. Planning staff may recommend a preferred location for the sign to be posted at the time of application.

#### TIMING

The sign(s) must be posted not less than 12 days prior to the scheduled Planning Commission public hearing and must remain in place until the day after the meeting. In the case of a postponement, the sign can either remain in place or be removed and reposted not less than 12 days prior to the next Planning Commission meeting. The applicant is responsible for removing the sign after the application has been acted upon by the Planning Commission.

The individual below is responsible for posting and removing the sign(s) provided consistent with the above guidelines and between the dates of:

| 9/24/2022                               | and          | 10/7/2022                  |  |  |
|-----------------------------------------|--------------|----------------------------|--|--|
| (applicant or staff to post sign)       |              | (applicant to remove sign) |  |  |
| Applicant Name: East Tennessee Children | n's Hospital |                            |  |  |
| Date: 8/22/2022                         |              | Sign posted by Staff       |  |  |
| File Number: 10-A-22-SC                 |              | Sign posted by Applicant   |  |  |