

REZONING

7-J-24-RZ

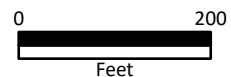
Petitioner: KARM Restoration, LLC



From: O (Office), F (Floodplain Overlay)

To: C-G-2 (General Commercial), F (Floodplain Overlay)

Map No: 81
Jurisdiction: City



Original Print Date: 6/5/2024

Knoxville - Knox County Planning Commission * City / County Building * Knoxville, TN 37902



Development Request

DEVELOPMENT

- Development Plan
- Planned Development
- Use on Review / Special Use
- Hillside Protection COA

SUBDIVISION

- Concept Plan
- Final Plat

ZONING

- Rezoning
- Plan Amendment
- Sector Plan
- City OYP / County Comp Plan

KARM Restoration, LLC

Applicant Name

Affiliation

5/24/2024

Date Filed

7/11/2024

Meeting Date (if applicable)

7-J-24-RZ

File Number(s)

CORRESPONDENCE

All correspondence related to this application should be directed to the approved contact listed below.

Benjamin C. Mullins Frantz, McConnell and Seymour, LLP

Name / Company

550 W. Main St. St. Suite 500 Knoxville TN 37902

Address

865-546-9321 / bmullins@fmsllp.com

Phone / Email

CURRENT PROPERTY INFO

KARM Restoration, LLC

Owner Name (if different)

418 N Broadway Knoxville TN 37902

Owner Address

865-673-6540

Owner Phone / Email

2909 N BROADWAY

Property Address

81 D B 01201 (part of)

Parcel ID

Part of Parcel (Y/N)?

4.18 acres

Tract Size

Knoxville Utilities Board

Sewer Provider

Knoxville Utilities Board

Water Provider

Septic (Y/N)

STAFF USE ONLY

West side of N. Broadway, north of Olgewood Avenue

General Location

City

Council District 5

O (Office), F (Floodplain Overlay)

Public/Quasi Public Land (Church)

County District

Zoning District

Existing Land Use

Central City

P-QP-Public/Quasi Public Land

N/A (Within City Limits)

Planning Sector

Land Use (City)/Place Type (County)

Growth Policy Plan Designation

DEVELOPMENT REQUEST

<input type="checkbox"/> Development Plan <input type="checkbox"/> Planned Development <input type="checkbox"/> Use on Review / Special Use	Related City Permit Number(s)
<input type="checkbox"/> Hillside Protection COA <input type="checkbox"/> Residential <input type="checkbox"/> Non-residential	
Home Occupation (specify) _____	
Other (specify) _____	

SUBDIVISION REQUEST

Proposed Subdivision Name	Related Rezoning File Number
Unit / Phase Number	
Additional Information _____	
<input type="checkbox"/> Attachments / Additional Requirements	

ZONING REQUEST

<input checked="" type="checkbox"/> Zoning Change	C-G-2 (General Commercial), F (Floodplain Overlay) Proposed Zoning	Pending Plat File Number
<input type="checkbox"/> Plan Amendment	Proposed Plan Designation(s)	
Proposed Density (units/acre) Previous Rezoning Requests		
Additional Information _____		

STAFF USE ONLY

PLAT TYPE <input type="checkbox"/> Staff Review <input type="checkbox"/> Planning Commission	Fee 1	Total
ATTACHMENTS <input type="checkbox"/> Property Owners / Option Holders <input type="checkbox"/> Variance Request <input type="checkbox"/> Amendment Request (Comprehensive Plan)	\$1,000.00	
ADDITIONAL REQUIREMENTS <input type="checkbox"/> Use on Review / Special Use (Concept Plan) <input type="checkbox"/> Traffic Impact Study <input type="checkbox"/> COA Checklist (Hillside Protection)	Fee 2	
	Fee 3	

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 associated materials are being submitted with his/her/its consent.

Applicant Signature	KARM Restoration, LLC Please Print	5/24/2024 Date
Phone / Email		
Property Owner Signature	KARM Restoration, LLC Please Print	5/24/2024 Date



Development Request

DEVELOPMENT

- Development Plan
- Planned Development
- Use on Review / Special Use
- Hillside Protection COA

SUBDIVISION

- Concept Plan
- Final Plat

ZONING

- Plan Amendment
 - SP
 - PA
- Rezoning

KARM Restoration, LLC

Owner/Applicant

Applicant Name

Affiliation

05/23/2024

July 11, 2024

File Number(s)

Date Filed

Meeting Date (if applicable)

7-J-24-RZ

CORRESPONDENCE

All correspondence related to this application should be directed to the approved contact listed below.

- Applicant
- Property Owner
- Option Holder
- Project Surveyor
- Engineer
- Architect/Landscape Architect

Benjamin C. Mullins

Frantz, McConnell & Seymour, LLP

Name

Company

550 West Main Street, Suite 500

Knoxville

TN

37902

Address

City

State

ZIP

865-546-9321

bmullins@fmsllp.com

Phone

Email

CURRENT PROPERTY INFO

418 N. Broadway Knoxville TN 37919

865-673-6540

Property Owner Name (if different)

Property Owner Address

Property Owner Phone

2909 N. Broadway

081DB01201

Property Address

Parcel ID

KUB

KUB

N

Sewer Provider

Water Provider

Septic (Y/N)

STAFF USE ONLY

E of N Broadway near intersection of Edgewood Ave., N of Oglewood

~4.18 Acres

General Location

Tract Size

5

O and C-G-2

P-QP

City County

District

Zoning District

Existing Land Use

Central City

MU-SD (MU-CC7)

NA (In City)

Planning Sector

Land Use / Place Type
CITY COUNTY

Growth Policy Plan Designation

DEVELOPMENT REQUEST

Development Plan
 Use on Review / Special Use
 Hillside Protection COA
 Residential
 Non-Residential
 Home Occupation (specify) _____
 Other (specify) _____

Related City Permit Number(s)

SUBDIVISION REQUEST

Proposed Subdivision Name _____
 Unit / Phase Number _____
 Combine Parcels
 Divide Parcel
 Total Number of Lots Created _____
 Other (specify) _____
 Attachments / Additional Requirements _____

Related Rezoning File Number

ZONING REQUEST

Zoning Change
 C-G-2 for the entirety of the Property
 Proposed Zoning _____
 Plan Amendment Change
 Proposed Plan Designation(s) _____
 Proposed Density (units/acre) _____
 Previous Rezoning Requests _____
 Other (specify) _____

Pending Plat File Number

STAFF USE ONLY

PLAT TYPE
 Staff Review
 Planning Commission
ATTACHMENTS
 Property Owners / Option Holders
 Variance Request
 Amendment Request (*Comprehensive Plan*)
ADDITIONAL REQUIREMENTS
 Use on Review / Special Use (*Concept Plan*)
 Traffic Impact Study
 COA Checklist (*Hillside Protection*)

Fee 1	Total
Fee 2	
Fee 3	

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 associated materials are being submitted with his/her/its consent

Applicant Signature: *Samuel Mullins*
 KARM Restoration, LLC
 Date: *5/23/24*
 Please Print: _____
 865-546-9321
 Email: *bmullins@fmsllp.com*
 Phone Number: _____
 Email: _____
 Property Owner Signature: *Samuel Mullins*
 Karm Restoration, LLC
 Date Paid: *5/23/24*
 Please Print: _____
 Date Paid: *05/24/2024, SG*

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-of-way 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:

_____ 06/28/2024 _____ and _____ 07/12/2024 _____
 (applicant or staff to post sign) (applicant to remove sign)

Applicant Name: KARM Restoration, LLC

Date: 05/24/2024

File Number: 7-J-24-RZ

- Sign posted by Staff
- Sign posted by Applicant