

**FINAL SUBDIVISION PLAT**

**11-SF-24-F**

**Petitioner:** Metcalf, Leah

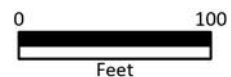


Final Plat For: Final plat of replat of a portion of lot 7 of W. M. McNeely Addition

**Map No:** 82  
**Jurisdiction:** City

**Original Print Date:** 10/15/2024

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

**Leah Metcalf**

Applicant Name

Affiliation

**9/25/2024**

Date Filed

**11/14/2024**

Meeting Date (if applicable)

**11-SF-24-F**

File Number(s)

## CORRESPONDENCE

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

**Leah Metcalf Atlas Survey & Mapping, LLC**

Name / Company

**7016 Maize Drive Knoxville TN 37918**

Address

**865-248-2424 / lmetcalf@atlassurveytn.com**

Phone / Email

## CURRENT PROPERTY INFO

**Sun Creek Capital LLC**

Owner Name (if different)

**8913 Town and Country Cir Knoxville TN**

Owner Address

**915-504-1071**

Owner Phone / Email

**2117 Citrus St.**

Property Address

**82 A D 002**

Parcel ID

Part of Parcel (Y/N)?

**10431 square feet**

Tract Size

**Knoxville Utilities Board**

Sewer Provider

**Knoxville Utilities Board**

Water Provider

**No**

Septic (Y/N)

## COMMUNITY ENGAGEMENT

*Sign and return the **Public Notice and Community Engagement** form with this application.*

*Planning strives to provide community members with information about upcoming cases in a variety of ways. In addition to posting public notice signs, our agency encourages applicants to provide information and offer opportunities for dialogue related to their upcoming case(s). **We require applicants to acknowledge their role in this process.***

## 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

<b>Final plat of replat of a portion of lot 7 of W. M. McNeely Addition</b>	Related Rezoning File Number
Proposed Subdivision Name	
Unit / Phase Number <input checked="" type="checkbox"/> Resub Parcels <b>1</b>	Total Number of Lots Created
Additional Information _____	
<input type="checkbox"/> Attachments / Additional Requirements	

## ZONING REQUEST

<input type="checkbox"/> Zoning Change    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

<b>PLAT TYPE</b> <input type="checkbox"/> Staff Review <input checked="" type="checkbox"/> Planning Commission	Fee 1	Total
<b>ATTACHMENTS</b> <input type="checkbox"/> Property Owners / Option Holders <input checked="" type="checkbox"/> Variance Request <input type="checkbox"/> Amendment Request (Comprehensive Plan)	<b>\$500.00</b>	
<b>ADDITIONAL REQUIREMENTS</b> <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	<b>Leah Metcalf</b> Please Print	<b>9/25/2024</b> Date
Phone / Email		
Property Owner Signature	<b>Sun Creek Capital LLC</b> Please Print	<b>9/25/2024</b> Date



# Development Request

### DEVELOPMENT

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

### SUBDIVISION

- Concept Plan
- Final Plat
- Variance

### ZONING

- Plan Amendment
  - SP
  - OYP
- Rezoning

Leah Metcalf

Applicant Name

Affiliation

~~08/09/2024~~ 09/25/2024

~~N/A~~ 11/14/2024

Date Filed

Meeting Date (if applicable)

File Number(s)

**11-SF-24-F**  
~~8-Q-24~~

## 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

Leah Metcalf

Atlas Survey & Mapping, LLC

Name

Company

7016 Maize Dr

Knoxville

TN

37918

Address

City

State

ZIP

865-248-2424

lmetcalf@atlassurveytn.com

Phone

Email

## CURRENT PROPERTY INFO

SUN CREEK CAPITAL LLC

8913 TOWN AND COUNTRY CIR #1099

915-504-1071

Property Owner Name (if different)

Property Owner Address

Property Owner Phone

2117 Citrus St

082AD002

Property Address

Parcel ID

KUB

KUB

N

Sewer Provider

Water Provider

Septic (Y/N)

## STAFF USE ONLY

West side of Citrus Street, east of Greenfield Lane

10,431 sq ft

General Location

Tract Size

City  County

4th  
District

RN-4, HP

Zoning District

AgForVac

Existing Land Use

East City

MDR & HP

N/A

Planning Sector

Sector Plan Land Use Classification

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

**Final Plat of Replat of a Portion of Lot 7 of W.M. McNeely Addition**

Proposed Subdivision Name

Unit / Phase Number    Combine Parcels    Divide Parcel

Total Number of Lots Created

Other (specify) **LOT OF RECORD**

Attachments / Additional Requirements

Related Rezoning File Number

## ZONING REQUEST

Zoning Change

Proposed Zoning

Plan Amendment Change

Proposed Plan Designation(s)

Pending Plat File Number

Proposed Density (units/acre)

Previous Rezoning Requests

Other (specify) \_\_\_\_\_

## STAFF USE ONLY

### PLAT TYPE

- Staff Review    Planning Commission

### ATTACHMENTS

- Property Owners / Option Holders    Variance Request

### ADDITIONAL REQUIREMENTS

- Design Plan Certification (*Final Plat*)  
 Use on Review / Special Use (*Concept Plan*)  
 Traffic Impact Study  
 COA Checklist (*Hillside Protection*)

Fee 1		Total
0201	\$250.00	
Fee 2		<del>\$250.00</del>
0205	\$250.00	\$500.00
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**

Digitally signed by Leah Metcalf  
Date: 2024.08.09 14:00:12 -05'00'

Leah Metcalf

08/09/2024

Applicant Signature

Please Print

Date

865-248-2424

lmetcalf@atlassurveytn.com

Phone Number

Email

(Variance) 09/26/2024, SG

(Final Plat) 08/12/2024, SG

Property Owner Signature

Please Print

Date Paid