



Development Request

Subdivision	☐ Concept Plan*	Final Plat		K K	equest
Zoning	Rezoning	☐ Plan Amendment*	☐ Governmental Rezonin	ng	
Development	☐ Development Plan*	☐ Planned Development*	' ☐ Use on Review / Specia	al Use* 🔲 Hillsi	de Protection COA*
*These applicatio	on types require a pre-ap	plication consultation with P	lanning staff.		
Benchmark As	ssociates, Inc.	Consultant			
Applicant Name			Affiliation		
29 September 2025		N /A 11/13/2025			File Number(s)
Date Filed		Meeting Date (if applicable)		11-SD-25-F	
Corresp	oondence				
		approved contact listed belon materials and is part of the			e and elsewhere on
			ect Surveyor		Landscape Architect
Benjamin J. M	loorman		Benchmark Associate	es, Inc.	
Name			Company		
PO Box 23892			Knoxville	Tennessee	37933
Address			City	State	ZIP
865-692-4090					
Phone		Email			THE RESTRICT
Current Pr	roperty Info				
Poplar Farms		3200 N Hawthorne Street, Chattanooga, TN 423-991-9853			
Property Owner Name (if different) O W. Emory Road		Property Owner Address Property Owner Phone 076 021.00 (part of)			ty Owner Phone
Property Address Parcel ID				THE PARTY NAMED IN	
WKUD		WKUD			N
Sewer Provider		Water Provider			Septic (Y/N)
Developm	ent Request				
Residential Non-Residential		er complete and complete and an experience		RELATED CITY PERMIT NUMBER	
Proposed Use					
Specify if a traffic	impact study is required	d: Yes (required to be so	ubmitted with application)	□No	

Subdivision Request

Poplar Far	ms Subdivision				RELATED REZONING FILE NUMBER
Proposed Sul	odivision Name	antic Control			
Unit / Phase	Number Cor	al)			
☐ Other (sp	ecify)			AND THE RESERVE TO THE PARTY OF	
Specify if req	uesting: Variance	e 🗌 Altern	ative design standar	d	
Specify if a tr	affic impact study is	required: 🔲	Yes (required to be	submitted with application)	■ No
Zon	ing Request				
					PENDING PLAT FILE NUMBER
☐ Zoning Ch	ange Proposed Zon	a open day with me made			
☐ Sector Pla	n 🔲 One Year Plai			nits/acre, for PR zone only)	
☐ Plan Amei	ndment Change Pro	posed Plan De	esignation(s)		
	county, submit plan ent request with app	ication F	Previous Rezoning Re	quests	
☐ Other (spe	ecify)				
	thorization	prope	erty AND 2) The applica		errect: 1) He/she/it is the owner of the re being submitted with his/her/its cons 29 September 2025
Applicant Signature		e de la constante de la consta	Print Name / Affiliation		Date
865-692-4	090		970		
Phone Number			Email		09/30/2025,SG
Property Owner Signature			Please Print		Date Paid
Staff Use	Only	inistrative Revi	iew	ADDITIONAL REQUIREMENTS	Property Owners / Option Holders
FEE 1		FEE 2		FEE 3	TOTAL
0203	\$820.00	0208	\$310.00		\$1,130.00