

CASE SUMMARY

APPLICATION TYPE: USE ON REVIEW

KNOXVILLE-KNOX COUNTY

M P C
METROPOLITAN
P L A N N I N G
C O M M I S S I O N

T E N N E S S E E

Suite 403 • City County Building
400 Main Street
Knoxville, Tennessee 37902
865 • 215 • 2500
FAX • 215 • 2068
www.knoxmpc.org

File Number: 10-H-03-UR **Related File Number:**
Application Filed: 10/6/2003 **Date of Revision:**
Applicant: SPIRIT OF THE SMOKIES
Owner:

PROPERTY INFORMATION

General Location:
Other Parcel Info.:
Tax ID Number: 999 999 **Jurisdiction:** City
Size of Tract:
Accessibility:

GENERAL LAND USE INFORMATION

Existing Land Use:
Surrounding Land Use:
Proposed Use: **Density:**
Sector Plan: **Sector Plan Designation:**
Growth Policy Plan:
Neighborhood Context:

ADDRESS/RIGHT-OF-WAY INFORMATION (where applicable)

Street:
Location:
Proposed Street Name:
Department-Utility Report:
Reason:

ZONING INFORMATION (where applicable)

Current Zoning:
Former Zoning:
Requested Zoning:
Previous Requests:
Extension of Zone:
History of Zoning:

PLAN INFORMATION (where applicable)

Current Plan Category:
Requested Plan Category:

