# CASE SUMMARY

APPLICATION TYPE: USE ON REVIEW



FAX•215•2068

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File Number:4-F-04-URApplication Filed:3/8/2004Applicant:J. ROYOwner:

#### PROPERTY INFORMATION

| General Location:   | East side Cliffside Ln., south side Holston Hills Rd.  |                    |  |
|---------------------|--|--------------------|--|
| Other Parcel Info.: |  |                    |  |
| Tax ID Number:      | 71 M C 012   | Jurisdiction: City |  |
| Size of Tract:      | 0.89 acre  |                    |  |
| Accessibility:      | Access is via Cliffside Ln., a dead-end local street with a pavement width of 16' within a 40' right-of-way. |                    |  |

**Related File Number:** 

Date of Revision:

| GENERAL LAND USE INFORMATION |   |                          |          |  |  |  |
|------------------------------|---|--------------------------|----------|--|--|--|
| Existing Land Use:           | Detached single family dwelling   |                          |          |  |  |  |
| Surrounding Land Use:        |   |                          |          |  |  |  |
| Proposed Use:                | Part-time Chiropractic office   |                          | Density: |  |  |  |
| Sector Plan:                 | East City   | Sector Plan Designation: |          |  |  |  |
| Growth Policy Plan:          | Urban Growth Area (Inside City Limits)  |                          |          |  |  |  |
| Neighborhood Context:        | Zoning in the area consists of R-1 residential and OS-1 open space. Development in the area consists of single family dwellings and Holston Hills Country Club. |                          |          |  |  |  |

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

Street:

1502 Cliffside Ln

Location:

**Proposed Street Name:** 

**Department-Utility Report:** 

Reason:

## ZONING INFORMATION (where applicable)

 Current Zoning:
 R-1 (Single Family Residential)

 Former Zoning:

**Requested Zoning:** 

Previous Requests:

Extension of Zone:

History of Zoning: None noted

## PLAN INFORMATION (where applicable)

Current Plan Category:

**Requested Plan Category:** 

## SUBDIVISION INFORMATION (where applicable)

Subdivision Name:

Surveyor:

No. of Lots Proposed:

No. of Lots Approved: 0

Variances Requested: S/D Name Change:

#### OTHER INFORMATION (where applicable)

Other Bus./Ord. Amend.:

|                        | MPC ACTION AND DISPOSITION  |  |  |
|------------------------|---|--|--|
| Planner In Charge:     | Dan Kelly   |  |  |
| Staff Recomm. (Abbr.): | APPROVE the request for a home occupation for a private chiropractic practice at this location subject to 3 conditions  |  |  |
| Staff Recomm. (Full):  | <ol> <li>Meeting all requirements of Article 5, Section 12 of the Knoxville Zoning Ordinance.</li> <li>Meeting all other applicable requirements of the Knoxville Zoning Ordinance.</li> <li>Meeting all applicable requirements of the Knoxville Dept. of Engineering.</li> </ol>  |  |  |
|                        | With the conditions noted, this plan meets the requirements for approval in the R-1 District and all other criteria for approval of a use on review.  |  |  |
| Comments:              | The applicant is proposing to move her part-time chiropractic practice to her home. In the materials submitted with the application, it is stated the practice is currently limited to approximately 20 hours per week with an average of 5 patients per day.   |  |  |
|                        | A home occupation should not detract from the aesthetic quality or the general function of the surrounding residential uses. The development standards for a home occupation as contained in the Knoxville Zoning Ordinance provide assurance that the neighborhood will not be adversely impacted. In this particular case, the applicant is the only employee of the practice. The business will only occupy 14% of the finished floor area of the dwelling. This is less than the 25% permitted by the Zoning Ordinance. No changes in the exterior appearance is proposed due to this request. The home occupation will occur in the main dwelling and not in any accessory building. Traffic generated by this request will not be noticeable due to the close proximity to Holston Hills Country Club. The country club draws traffic into the area from all over the community.            |  |  |
|                        | EFFECT OF THE PROPOSAL ON THE SUBJECT PROPERTY, SURROUNDING PROPERTY AND THE COMMUNITY AS A WHOLE   |  |  |
|                        | <ol> <li>The proposed home occupation will have minimal impact on local services since all utilities are in<br/>place to serve this development.</li> <li>The proposed use is consistent with the other residential development found in the area.</li> </ol>   |  |  |
|                        | CONFORMITY OF THE PROPOSAL TO CRITERIA ESTABLISHED BY THE KNOXVILLE ZONING ORDINANCE  |  |  |
|                        | <ol> <li>The proposed home occupation meets all of the requirements of Article 5, Section 12 of the<br/>Knoxville Zoning Ordinance, development standards for home occupations.</li> <li>The proposed part-time chiropractic office is consistent with the general standards for uses<br/>permitted on review: The proposed development is consistent with the adopted plans and policies of<br/>the General Plan and Sector Plan. The use is in harmony with the general purpose and intent of the<br/>Zoning Ordinance. The use is compatible with the character of the neighborhood where it is proposed.<br/>The use will not significantly injure the value of adjacent property.</li> <li>Due to the non-residential traffic generated by nearby Holston Hills Country Club, traffic generated<br/>by this proposed use will not have a negative impact on the surrounding area.</li> </ol> |  |  |
|                        | CONFORMITY OF THE PROPOSAL TO ADOPTED PLANS   |  |  |
|                        | 1. The East City Sector Plan identifies this property for low density use. The proposed development is  |  |  |

consistent with the Sector Plan.

|                                    | MPC's approval or denial of this request is final, unless the action is appealed to City Council, or the<br>Knox County Board of Zoning Appeals, as appropriate. The date of the appeal hearing will depend on<br>when the appeal application is filed.   |                 |                                  |  |  |  |
|------------------------------------|---|-----------------|----------------------------------|--|--|--|
| MPC Action:                        | Approved MP   |                 | MPC Meeting Date: 4/8/2004       |  |  |  |
| Details of MPC action:             | <ol> <li>Meeting all requirements of Article 5, Section 12 of the Knoxville Zoning Ordinance.</li> <li>Meeting all other applicable requirements of the Knoxville Zoning Ordinance.</li> <li>Meeting all applicable requirements of the Knoxville Dept. of Engineering.</li> <li>Limit the hours of operation to 8:30 a.m. to 12:30 p.m. on Tuesdays and Thursdays.</li> <li>Permit no more than two patients be at the business at any one time.</li> <li>Specifically prohibit the display of any business sign on the site.</li> <li>State that the sale of products not produced on the site is specifically prohibited.</li> <li>With the conditions noted, this plan meets the requirements for approval in the R-1 District and all other</li> </ol> |                 |                                  |  |  |  |
|                                    | criteria for approval of a use on review.   |                 |                                  |  |  |  |
| Summary of MPC action:             | APPROVE the request for a home occupation for a private chiropractic practice at this location subject to 7 conditions  |                 |                                  |  |  |  |
| Date of MPC Approval:              | 4/8/2004  | Date of Denial: | Postponements:                   |  |  |  |
| Date of Withdrawal:                | Withdrawn prior to publication?: Action Appealed?: 4/16/2004  |                 |                                  |  |  |  |
| LEGISLATIVE ACTION AND DISPOSITION |   |                 |                                  |  |  |  |
| Legislative Body:                  | City Council  |                 |                                  |  |  |  |
| Date of Legislative Action:        | 5/25/2004   | Date of Leg     | islative Action, Second Reading: |  |  |  |
| Ordinance Number:                  |   | Other Ordir     | nance Number References:         |  |  |  |
| Disposition of Case:               | Approved appeal   | Disposition     | of Case, Second Reading:         |  |  |  |
| If "Other":                        |   | If "Other":     |                                  |  |  |  |

Amendments:

Use on review Denied

Date of Legislative Appeal:

**Effective Date of Ordinance:** 

Amendments: