

# CASE SUMMARY

**APPLICATION TYPE: ROW CLOSURE**

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

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400 Main Street  
Knoxville, Tennessee 37902  
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**File Number:** 5-B-02-AC                      **Related File Number:**  
**Application Filed:** 4/8/2002                      **Date of Revision:**  
**Applicant:** FORT SANDERS REGIONAL MEDICAL CENTER  
**Owner:**

## **PROPERTY INFORMATION**

**General Location:**

**Other Parcel Info.:**

**Tax ID Number:** 94 D 005

**Jurisdiction:** City

**Size of Tract:**

**Accessibility:**

## **GENERAL LAND USE INFORMATION**

**Existing Land Use:**

**Surrounding Land Use:**

**Proposed Use:**

**Density:**

**Sector Plan:** Central City

**Sector Plan Designation:**

**Growth Policy Plan:**

**Neighborhood Context:**

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

**Street:** Unnamed Alley

**Location:** Between Nineteenth Street and Northeast 207.44 feet

**Proposed Street Name:**

**Department-Utility Report:**

**Reason:** To secure parking lot

## **ZONING INFORMATION (where applicable)**

**Current Zoning:** O-1 (Office, Medical, and Related Services)

**Former Zoning:**

**Requested Zoning:**

**Previous Requests:**

**Extension of Zone:**

**History of Zoning:**

## **PLAN INFORMATION (where applicable)**

**Current Plan Category:**

**Requested Plan Category:**

