

CITY OF HARRIMAN
P.O. DRAWER 433
HARRIMAN, TN 37748

RE-ZONING PETITION

Date: _____

Property Address: _____

Current Zoning: _____ Proposed Zoning: _____

Name of Petitioner: _____

Address: _____

Telephone#: _____

Property Owner: _____

Explain how the strict application of the Zoning Ordinance would be an unnecessary hardship on the owner:

Granting of this Re-Zoning will not be contrary to public interest because:

	Adjacent Property Owners	Map/Group/Parcel
Right Side:	_____	_____
Left Side:	_____	_____
Front:	_____	_____
Back:	_____	_____
Others:	_____	_____

Application Fee = \$ 30.00

To: City of Harriman

Approved by HARRIMAN PLANNING COMMISSION: _____ (Date)
Chairman Signature: _____