



PRE-SUBMITTAL CONFERENCE APPLICATION

Project Information

Project Contact: _____ Phone: _____

Email: _____

Project Name: _____

Project Address: _____

Parcel ID: _____ Zoning: _____ Total Building Sq. Ft.: _____ # Stories: _____

Business / Tenant Name: _____

Existing Use: _____ Proposed Use: _____

Description: _____

Describe area(s) of concern: _____

Contact Information

(Please include name, phone, and/or email address.)

Contractor: _____

Architect: _____

Engineer: _____

Developer: _____

Owner: _____

THIS APPLICATION IS SUBJECT TO THE TENNESSEE OPEN RECORDS ACT

For office use:

Date/Time of Meeting: _____ Project drawings submitted: _____ Yes / No