



📍 600 East Walnut Street, Dickson, TN 37055.

☎ (615) 441-9508

🌐 cityofdickson.com

01.

OWNER OF RECORD INFORMATION

Name:

Mailing Address: *(No P.O. Boxes, please)*

Email:

Telephone Number:

02.

OWNER'S REPRESENTATIVE *(Surveyor, Self, Engineer, etc.)*

Name:

Name of Firm:

Mailing Address: *(No P.O. Boxes, please)*

Email:

Telephone Number:

03.

PROPERTY INFORMATION & SPECIFIC REQUEST

1. Current Zoning of Property:

2. Physical Address of Property:

3. Tax Map and Parcel Number:

4. Size of Property (square feet or acres):

5. Please List the Special Use being Sought:



FOR STAFF USE ONLY

Date Application Received:

Fee Payment Date:



SUBMITTING THE APPLICATION

1. Submit this completed application and fee payment to:
2. Submit documentation supporting the request for the variance (site plan, drainage study, etc.)
3. Attend the Board of Zoning Appeals meeting. Be ready to present and answer questions.
Failure to appear at the Board of Zoning Appeals meeting may result in the denial of the application.



PROCEDURE NOTES

1. Special Exceptions are requested when a certain use has been identified as a “Special Exception” in the Zoning Ordinance for the zone where the property is located. Special Exceptions must first be approved by the Board of Zoning Appeals first before any site plans for the project are submitted for consideration to the Planning Commission.
2. The applicant must demonstrate compliance with the specific standards for the use, as set forth in the City’s Zoning Ordinance. The burden is on the applicant to demonstrate to the Board of Zoning Appeals that all conditions of the Zoning Ordinance have been met.
3. The Board of Zoning Appeals will consider the request and determine if it meets the requirements set forth by the City’s Zoning Ordinance.
4. If the Board of Zoning Appeals approves the use, the applicant may submit a site plan for consideration to the Planning Commission.
5. If the Board of Zoning Appeals denies the application for the Special Exception, the project may not proceed.



SIGNATURES

Owner’s Signature:

Date:

Owner’s Representative’s Signature:

Date:



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Fee Payment Date: