

APPLICATION
Board of Zoning Appeals



APPLICANT INFORMATION:

Last Name	Begley	First	Joe	M.I.		Date	13 Oct 2023
Street Address	1505 Fairidge Drive			Apartment/Unit #			
City	Kingsport	State	TN	ZIP	37664		
Phone	423-677-6778		E-mail Address joe@thebegleygroup.net				

PROPERTY INFORMATION:

Tax Map Information	Tax map: 062A	Group: K	Parcel: 003.00	Lot:		
Street Address	TBD Caymus Court			Apartment/Unit #		
Current Zone	B-1	Proposed Zone	No change			
Current Use	Multifamily	Proposed Use	No change			

REPRESENTATIVE INFORMATION:

Last Name	Stone	First	Mike	M.I.	A.	Date	13 Oct 2023
Street Address	2141 Moccasin Street South			Apartment/Unit #			
City	Kingsport	State	TN	ZIP	37660		
Phone	423-418-3333		E-mail Address mike@mikestonesrchitect.com				


REQUESTED ACTION:

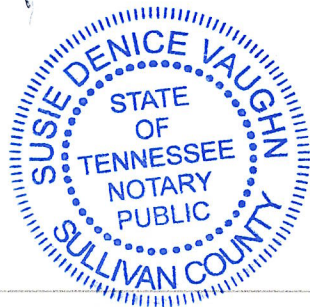
19ft Encroachment upon the northernmost setback of the existing cul-de-sac. The hardship is the small amount of space left

DISCLAIMER AND SIGNATURE

By signing below I state that I have read and understand the conditions of this application and have been informed as to the location, date and time of the meeting in which the Board of Zoning Appeals will review my application. I further state that I am/we are the sole and legal owner(s) of the property described herein and that I am/we are appealing to the Board of Zoning Appeals.

Signature:  Date: **10-13-2023**

Signed before me on this 13 day of October, 2023
 a notary public for the State of Tennessee
 County of Sullivan
 Notary 



My Commission Expires

01/26/2025

CITY PLANNING OFFICE

Received Date:

Received By:

Application Fee Paid:

Board of Zoning Appeals Meeting Date:

Section of Applicable Code:

Building/Zoning Administrator Signature:

Date:

Completed Site Plans Received:

Previous requests or file numbers:

Signature of
City Planner:

Date:



[Faint, illegible handwritten text and signatures]