



City of Mount Pleasant

"Experience Our History...Explore Our Possibilities"

Department of Planning and Zoning Application for Review

209 Bond Street, Mt. Pleasant TN 38474



MPMPC FILE # _____ Date: 5/12/26

Application Submitted for _____

Title of Project: Lineage Metals

Street Location: Joe Frank Porter Road

Tax Map: _____ Group: _____ Parcel: _____

Total Acreage: 6.85 Number of Lots: 1

Applicant:

Name: Billy Hill

Company/Partnership: Hill Construction, LLC

Address: 1117 North Locust Avenue

City: Lawrenceburg State: TN Zip: 38464

Telephone: _____ Mobile: (256)7 Email: hilli

Owner (if applicant is not owner):

Name: Conor Lowery

Company/Partnership: Lineage Metals

Address: 2737 Couchville Pike, Suite 300

City: Nashville State: TN Zip: 37217

Telephone: _____ Mobile: (925) Email: conor

Surveyor/Engineer:

Name: Andy Somers

Company/Partnership: Somers Consulting Services, LLC

Address: 2206 Shades Crest Rd

City: Huntsville State: AL Zip: 35801

Telephone: _____ Mobile: (256) Email: some



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This application shall be accompanied by maps, drawings, or other supportive information necessary to explain the request. It is recommended that the applicant or a representative be present at the Planning Commission.

TCA 134-304(a) states, in part. "The Commission shall approve or disapprove a plat within thirty (30) Days after submission of such plat...." By signing this application, the applicant (and owners, as applicable) acknowledges that items for consideration by the Planning Commission shall be considered submitted when all required information, a completed submittal application, and fee have been received by the City of Mount Pleasant.

Failure by the applicant to address all the requirements of the City of Mount Pleasant Zoning Ordinance and/or Subdivision Regulations may result in a deferral or denial of the proposed development by the Mount Pleasant Planning Commission.

As the applicant or the applicant's agent, I understand that it is my sole responsibility to notify my client of the time, date, and location of the Planning Commission and subsequent Mount Pleasant City Commission meetings at which this application will be heard and to ensure that someone representing this item is in attendance at each of these meetings.

I hereby attest that I have provided a complete application and included all of the necessary attachments as required. I understand that if information is incomplete and/or otherwise not provided, this application may be deferred until such time as the necessary information is provided.

Owner/Agent submitting this application

Date

STAFF USE ONLY – DO NOT WRITE BELOW THIS LINE

Recording Fee\$ _____ Review Fee.....\$ _____ Appeal Fee.....\$ _____

Check # _____ Cash_____ Debit or Charge _____ Amount Paid \$ _____

Receipt # _____ Date Paid _____

Date of Review: _____ Approved Denied ____ Withdrawn ____