APPLICATION FOR ADEQUATE FACILITIES TAX PLAN REVIEW

Date: _____

PARCEL INFORMATION

Jurisdiction: (Circle One) Sumner County Millersville Mitchellville Westmoreland

Hendersonville Gallatin Whitehouse

Property Address: _____
(project address)

Subdivision Name: _____

Business Name: _____
(project name)

Tax Map: _____ Group: _____ Parcel: _____

SQUARE FOOTAGE: _____

*Include- Unfinished basement, bonus room, etc.
*Exclude- Garage, open porches

APPLICANT INFORMATION

Name: _____

Address: _____

Daytime Phone: (number to be notified when ready) _____

OFFICE USE ONLY

Type of Construction: Residential: ___ Industrial: ___ Amount per sq. ft.: $. 70____ $ .40____

Exempt: ____ Commercial/Retail ___

501(c) (3) ___

Fire/Disaster ___

Church/Public Bldg ___

Taxable Square Footage: _____

Total Tax Due: $ _____

_____
Signature

Receipt Number: _____

Tax District: _____

Received by: Check #_____

Date: _____

Cash _____

_____
Signature