



# TULLAHOMA REGIONAL PLANNING COMMISSION

321 North Collins Street, Tullahoma, Tennessee, 37388

OFFICE: 931.455.2282 FAX: 931.454.1765

## PLANNED UNIT DEVELOPMENT (PUD) APPLICATION

Name of PUD	Section Number (if applicable)	Date of application
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Type:  Residential  Commercial  Industrial  Mixed-Use  Includes a Subdivision Plat

Applicant/ Developer

Mailing Address	City	State	Zip
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Phone Number	Fax Number	Email
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Project Engineer/Surveyor

Mailing Address	City	State	Zip
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Phone Number	Fax Number	Email
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NOTE: The applicant is responsible for notifying the Planning & Codes Department of any changes to contact information.

### PLEASE COMPLETE THE FOLLOWING PROPERTY INFORMATION:

1.	Tax Map	Group	Parcel	Deed Book	Page Number
	Civil District		County		Project Density (if applicable)
Was a concept meeting held with staff? <input type="checkbox"/> YES <input type="checkbox"/> NO					
If yes, on what date did this meeting occur:					

### ADDITIONAL REQUIRED INFORMATION:

2.	<input type="checkbox"/> A copy of the owner's deed
<i>Note: NPDES is required by the state if more than 1 acre of land is to be disturbed.</i>	

Project Description:

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief.

Applicant's Signature:	Applicant's Name (Printed):	Date:
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### STAFF USE ONLY

	Submittal Type	Fees	Total
1.	PUD Development Plan	\$37.50 base fee/ \$37.50 per Acre	
	Preliminary Plat (Major)	\$37.50 base fee/\$37.50 per Acre	

Received by:	Date:	Receipt Number:
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**MODE OF DELIVERY AGREEMENT  
TENNESSEE DISTRICT**

**NAME OF PROJECT** \_\_\_\_\_  
**ADDRESS OF PROJECT** \_\_\_\_\_ **DATE** \_\_\_\_\_  
**POST OFFICE/ZIPCODE** \_\_\_\_\_ **PROPOSED ROUTE #** \_\_\_\_\_

**This Project is:** **NEW CONSTRUCTION** \_\_\_ **RENOVATION** \_\_\_ (If renovation, please complete conversion request)

**Estimated 1<sup>ST</sup> Occupancy Date:** \_\_\_\_\_ **10% Occupancy:** \_\_\_\_\_ **Completion:** \_\_\_\_\_  
**Delivery options will be explained by USPS representative (options shown in gray below).**

<u>Type of Project</u>	<u>Deliveries</u>	<u>Equipment-Type / #</u>	<u>EQUIPMENT OPTIONS</u>
Office Bldg (___Floors)	_____	_____	CBU Type I (8 Del)
Shopping Mall	_____	_____	CBU Type II (12 Del)
Strip Mall	_____	_____	CBU Type III (16 Del)
Apts./Condos (___Floors)	_____	_____	CBU Type IV (13 Del)
Townhouses	_____	_____	Curb line 2/post
Single Family Homes	_____	_____	Curb line 4/post
Trailer Park	_____	_____	Wall mount STD 4C
Other (Specify)	_____	_____	

**DEVELOPER / CONTRACTOR / OWNER RESPONSIBILITY IS AS FOLLOWS:**

Location and installation of all receptacles must be approved by USPS representative.

Concrete pads for CBU's are required to meet USPS specifications.

Concrete pads for CBU's are installed by: Developer  X  other \_\_\_

Equipment purchased by: Developer  X  other \_\_\_

Equipment installed by: Developer  X  other \_\_\_

Equipment owned/maintained by: Developer \_\_\_ other \_\_\_

Keys issued to residents by: Developer  X  USPS \_\_\_ other \_\_\_

Locks changed by: Developer \_\_\_ USPS \_\_\_ other \_\_\_

Residents of single-family homes must be informed of their ongoing responsibility for keys; box maintenance/repair, snow removal, etc.

Note: On multi-tenant delivery and/or rental situations, the building owner/manager is responsible for lock changes. Owner/manager will handle parcels and accountable? Yes \_\_\_ No \_\_\_

This notice will serve as an Agreement / Letter of Consent to the Postal Service for the placement of Centralized Delivery Equipment at the agreed upon location(s) indicated on the plat map. By signing below, I acknowledge that the contractor options and responsibilities outlined above for receiving mail delivery service have been discussed with me.

**USPS REPRESENTATIVE**

**NAME** \_\_\_\_\_

**TITLE** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**TELEPHONE #** \_\_\_\_\_

**DATE** \_\_\_\_\_

**PROPERTY DEVELOPER/MGR/OWNER**

**NAME** \_\_\_\_\_

**TITLE** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**TELEPHONE #** \_\_\_\_\_

**DATE** \_\_\_\_\_

This agreement is subject to final approval by District Operations Programs Support. Submit completed agreement and other required attachments to the local Post Office to forward to the **Growth Management, Operations Programs** at the TN District Office