



HISTORIC
FRANKLIN
TENNESSEE

ACTION REQUEST – REQUEST FOR EARLIER AGENDA

Completed requests received by the first of the month will be placed on the following month's agenda (example: request received on April 1 will be placed on May's agenda)
No landscaping can be placed on agendas for the months of February; March; July; August; November and December. Landscaping limited to maximum 25% reduction when at least 50% complete.

Date Submitted

Complete name of project – indicate whether site plan or final plat.
Where applicable, include subdivision, section, revision, lot number and name of building.

TYPE OF IMPROVEMENT

A separate action request must be submitted for each improvement.

I (we) request that the following action be taken on this agreement:

<p>_____ Release</p> <p>_____ *Reduce and extend to _____ (six mos to one year)</p> <p>_____ Extend to _____ (six mos to one year)</p> <p>SIGNED: _____</p> <p>Developer or Representative</p>	<p><i>*This section not for landscaping.</i></p> <p><i>*If requesting reduction, indicate amount complete:</i></p> <p>_____ %</p> <p><i>If requesting reduction and less than 90% complete, estimate remaining amount to complete this improvement:</i></p> <p>\$ _____</p> <p><i>*Reductions shall not exceed 75%, or minimum maintenance amount.</i></p>
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*See new guidelines for details related to reductions at <http://www.franklintn.gov/home/showdocument?id=288>

For a release or reduction to be considered, the following statement must be completed by the developer's engineer, or for landscaping improvements, by the developer's landscape architect. (Incomplete requests will not be accepted):

Complete either section A or B and sign/seal and date below:

A: _____ (Engineer or Landscape Architect – print name) has personally visited this site and affirms that the improvements have been completed in accordance with the plans approved by the Franklin Municipal Planning Commission/City of Franklin.

B: _____ (Engineer or Landscape Architect – print name) affirms that _____ has personally visited this site and he/she is competent by education and/or experience to inspect, and is under my direct supervision. I further affirm that the improvements have been completed in accordance with the plans approved by the Franklin Municipal Planning Commission/City of Franklin.

SIGNED / PROFESSIONAL SEAL:

Engineer or Landscape Architect (sign and date on seal)

Forward completed request to COF Planning Dept., ATTN: Paula Kortas, email to PaulaK@franklinTN.gov or fax to 615-791-3257