

**CITY OF GATLINBURG  
RESIDENTIAL SITE PLAN CHECKLIST**

This checklist must accompany all residential site plans submitted for review by the Gatlinburg Planning Department. It should be understood that failure to complete all items listed below could result in the building permit request not being processed. Under the Applicant Review column at the left of the page, please check the items applicable to your project, include your signature and date of submittal at the bottom of the page.

**Applicant Review**

**Staff Review**

- |       |   |       |
|-------|---|-------|
| _____ | 1. City Tax Map Information- (found on tax notice)  | _____ |
|       | Tax Map: _____ Group: _____ Parcel: _____   |       |
| _____ | 2. County Map Book and Page Number of recorded plat   | _____ |
|       | Book #: _____ Page: _____   |       |
| _____ | 3. Copy of sewage disposal system approval  | _____ |
| _____ | 4. Location of existing and proposed structures, easements, and covenants                       | _____ |
| _____ | 5. Dimensions of all existing and proposed structures, easements, and covenants                 | _____ |
| _____ | 6. Building plans footprint (must match site plan footprint)                                    | _____ |
| _____ | 7. Acreage of property  | _____ |
| _____ | 8. Dimensions and call of all property lines  | _____ |
| _____ | 9. Setback lines: front, sides, and rear yard   | _____ |
| _____ | 10. Location and dimensions of parking spaces, turnaround areas, and driveway                   | _____ |
| _____ | 11. Width of access point on public street (may not exceed 26 feet in width)                    | _____ |
| _____ | 12. Density of proposed development   | _____ |
| _____ | 13. Elevation of any structures   | _____ |
| _____ | 14. Two legible copies of the site plan/survey  | _____ |
| _____ | 15. Location of structures within the Flood zone areas  | _____ |
| _____ | 16. Stamp of review and approval by the city utility department for water and/or sewer hook-ups | _____ |
| _____ | 17. E-911 address (Call 428-5542)   | _____ |

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Work Phone Number

*City of Gatlinburg, PO Box 5, 1230 East Parkway, Suite 4, Gatlinburg, TN 37738  
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