



City Of Chattanooga
Transforming Public Places Application

PERMIT NO. _____

Applicant Information

Applicant Name: _____

Business or Organization: _____

Email Address: _____ **Phone:** _____

Mailing Address: _____

City, State, Zip: _____

Proposed Location and Project Description

Closest Street Address: _____

Public Space to Utilize: _____ sidewalk _____ (#) on-street parking space(s) _____ roadway

Description of Location: _____

Project Type: _____ Bike Parking _____ Parklet _____ Plaza _____ Other

Description of project : _____

Please attach a design plan, photos, and/or sketches to illustrate the project.

Please attach documentation showing neighborhood support.

Applicant Signature _____ **Date** _____

_____ **Project concept approved – proceed to public input period**

_____ **Project concept not approved because:** _____

SIGNED _____ **DATE** _____