# **CASE SUMMARY**

APPLICATION TYPE: SPECIAL USE



File Number: 2-D-25-SU Related File Number:

Application Filed: 12/30/2024 Date of Revision:

Applicant: REALIGN WELLNESS, LLC

## **PROPERTY INFORMATION**

**General Location:** South side of E Woodland Ave, east of Kenyon St

Other Parcel Info.:

Tax ID Number: 81 E L 004 Jurisdiction: City

Size of Tract: 0.63 acres

Access ibility: Access is via E Woodland avenue, a minor arterial with 25 ft of pavement width within a 65 ft right-of-

way.

#### GENERAL LAND USE INFORMATION

**Existing Land Use:** Transportation/Communications/Utilities

**Surrounding Land Use:** 

Proposed Use: Drug/Alcohol/Mental Health Treatment Facility, Residential Density:

Planning Sector: Central City Plan Designation: MU-SD CC-8 (Mixed Use Special District, Medical Center Mi

Growth Policy Plan: N/A (Within City Limits)

**Neighborhood Context:** This area is characterized by commercial, residential, and institutional land uses. Commercial uses are

auto-oriented storefronts along E Woodland ave and N Broadway. Residential uses in the area are

single family homes. Institutional land uses are a public safety complex and a high school.

### ADDRESS/RIGHT-OF-WAY INFORMATION (where applicable)

Street: 900 E WOODLAND AVE

Location:

Proposed Street Name:

**Department-Utility Report:** 

Reason:

## ZONING INFORMATION (where applicable)

Current Zoning: O (Office), IH (Infill Housing Overlay)

Former Zoning:

Requested Zoning:

**Previous Requests:** 

**Extension of Zone:** 

History of Zoning: Rezoned from R-1A (Low Density Residential) & IH-1 (Infill Housing Overlay) to O-1 (Office, Medical,

and Related Services) & IH-1 (Infill Housing Overlay)

### PLAN INFORMATION (where applicable)

Current Plan Category: MU-SD CC-8 (Mixed Use Special District, Medical Center Mixed Use District)

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**Requested Plan Category:** 

If "Other":

Amendments:

**Date of Legislative Appeal:** 

## SUBDIVISION INFORMATION (where applicable) **Subdivision Name:** No. of Lots Proposed: No. of Lots Approved: 0 Variances Requested: S/D Name Change: OTHER INFORMATION (where applicable) Other Bus./Ord. Amend.: PLANNING COMMISSION ACTION AND DISPOSITION Planner In Charge: Jessie Hillman Staff Recomm. (Abbr.): Withdraw per the applicant's request. Staff Recomm. (Full): **Comments:** Withdrawn Action: **Meeting Date:** 2/13/2025 **Details of Action: Summary of Action:** Date of Approval: Date of Denial: Postponements: **Date of Withdrawal:** 2/13/2025 Withdrawn prior to publication?: Action Appealed?: LEGISLATIVE ACTION AND DISPOSITION Legislative Body: Knoxville-Knox County Planning Commission **Date of Legislative Action:** Date of Legislative Action, Second Reading: **Other Ordinance Number References: Ordinance Number: Disposition of Case: Disposition of Case, Second Reading:**

If "Other":

**Amendments:** 

**Effective Date of Ordinance:** 

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