



BOARD OF ZONING APPEALS (BZA) APPLICATION – CONDITIONAL USE

GENERAL INFORMATION

Applicant/Representative Information: Mario Sidrak
Subject Property Address: 799 W Main St Ste B
City: Hendersonville State: TN Zip: _____
Phone: _____ Email: _____
Map Group/Parcel#: _____
Current Zoning: _____
Owner of Subject Property (If different than applicant above) Name: Mohamed Abdoh
Owner Address: River Oaks
Phone: _____ Email: N/A

CONDITIONAL USE REQUEST

*****If the answer is not yes, the application will not be considered complete.*****

A. CONDITIONAL USE

Type of Use: Vape/Smoke Shop
Reason for request? Residing
Parking requirements? None
What is the lot square footage? 1960sqft

B. MAJOR HOME OCCUPATION

Days and hours of operation: _____
Type of business: _____
Number of employees: _____
Do you have HOA approval? _____

C. MATERIAL CHANGE

What is the reason for the request? _____

Are there elevations showing proposed structure or materials? _____

Is there a plot plan with the existing house? _____

OFFICE USE ONLY

Project Number: <u>BZA-007073-2026</u>	Action: _____
Review Fee: <u>\$946⁰⁰</u>	Date Paid: <u>1/14/2026</u>
Meeting/Action Date: <u>3/2/2026</u>	



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D. DETACHED ACCESSORY APARTMENT

Size of Lot: _____ Square footage of home: _____

Proposed overall/living space square footage: _____ / _____

Are there elevations of the proposed structure? _____

Is there a plot plan of proposed structure? _____

E. ADDITIONAL SIZE

Size of Lot: _____ Square footage of home: _____

Square footage of existing structure(s)/proposed structure: _____

Are there elevations of the proposed structure? _____

Is there a plot plan showing proposed structure? _____

What is the reason for the request? _____

****Verify lot coverage is not exceeded. ****

Please read the findings of fact below per the request:

****Please respond to each finding as if pertains to requested appeal****

Per 4.4.5 (Findings of Fact) in the City of Hendersonville Zoning Ordinance:

1. No conditional use shall be approved by the Board of Zoning Appeals unless it has made findings of fact, based upon the evidence presented at the public hearing, to support each of the following conclusions:
 - A. The conditional use is so designed, located, and proposed to be operated that the public health, safety and welfare will be protected.
 - B. The conditional use will not adversely affect other property in the area in which it is located.
 - C. The conditional use conforms to all applicable provisions of this Ordinance for the district in which it is to be located.
 - D. The conditional use in the specific location proposed is consistent with the spirit and intent of this Ordinance and the Land Use and Transportation Plan.
2. The Board of Zoning Appeals, in making findings of fact, may inquire into the following evidentiary issues, as well as any others it determines to be appropriate:
 - A. Whether property values in the immediate vicinity of the conditional use will be diminished or impaired.
 - B. Ingress and egress to the subject property and its proposed structures, with particular attention to automotive and pedestrian safety and convenience, traffic flow and control, including access by emergency vehicles.



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- C. Off-street parking and loading areas proposed for conditional use, with particular attention to the location and adequacy of such facilities.
- D. The operational characteristics of the proposed conditional use and their effects on adjacent properties. Particular attention shall be given to the hours of operation, noise, glare, odor, refuse storage, and other relevant environmental factors.
- E. Utilities and storm drainage facilities as proposed, with reference to their location, availability, adequacy, and compatibility.
- F. Screening, landscaping, and buffering, with specific reference to the type proposed, the dimensions and character, and the effectiveness in shielding adjacent properties.
- G. Signs and proposed exterior lighting with reference to glare, traffic safety, and compatibility, and harmony with adjacent properties.
- H. The quantity and degree of deviation from the applicable requirements of the district in which the subject property is located, as balanced against the desirability of the conditional use.

01/09/2026

Date

Mario Sidrak

Signature of Subject Property Owner (or Authorized Representative)

Mario Sidrak

Printed Name

I hereby swear and affirm that all of the above statements and information contained in all exhibits submitted with this application are true and correct.

If Authorized Representative is signing, provide a letter signed by the owner designating representative.

Sworn to and subscribed before me this 9th day of January, 2026.



[Signature]
Notary Public

Expiration Date: 05/24/2028