

RESIDENTIAL ZONING / BUILDING PERMIT APPLICATION

A. Site Address/Street _____ City _____

Lot Size / Acreage _____ Subdivision/Lot No. _____

B. Identification	Name	Address	City/State/Zip	Phone
Owner / Applicant				
Contractor / Installer				

Email Address: _____

C. Describe Existing Use/Conditions _____

D. Describe Proposed Work: _____

E. Improvement Type	Use Type (Check <input checked="" type="checkbox"/> applicable)
New	Single Family (SF) <i>*The existing dwelling will be removed within 30 days of Occupancy of the proposed dwelling _____ (Initial)</i>
Alteration	Basement <input type="checkbox"/> Unfinished <input type="checkbox"/> Finished (x) Roof Style _____
Addition	Manufactured Home (x) (YR) <i>Post 1976</i> Roof Material _____
Demolition	Deck (X) <input type="checkbox"/> Covered Exterior Finish _____
Relocation	Porch (X) <input type="checkbox"/> Covered Interior Finish _____
Foundation	Barn (X) Fireplace <input type="checkbox"/> Yes <input type="checkbox"/> No
Change of Use	Garage(X) Two-Family Duplex Vented <input type="checkbox"/> Yes <input type="checkbox"/> No
HVAC	Pool (X) Other _____
	Shed (X) _____

F. Building Planning	1 st Floor	SF
Type of Heating <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other	2 nd Floor	SF
Type of Water <input type="checkbox"/> Public <input type="checkbox"/> Well <input type="checkbox"/> Central Air <input type="checkbox"/> Yes <input type="checkbox"/> No	Finished Basement	SF
Type of Sewage <input type="checkbox"/> Public <input type="checkbox"/> Private Permit # _____	Attached Garage	SF
# of Rooms # of Bedrooms # of Baths Full Half	Other Roofed Areas (Porches, etc.)	SF
G. Encroachment Permit Number: # _____ County / State _____	TOTAL ROOFED AREA	SF
H. Construction Cost \$ _____	PERMIT FEE	\$ _____
	<i>*Make all checks payable to the Kentucky Building Code (KBC).</i>	

Code Used: 2018 Kentucky Residential Code – The owner of this building and undersigned permit applicant do hereby covenant and agree to comply with all the applicable regulations pertaining to building construction of the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and certify that the above information and statements given on this application, drawings and specifications are to the best of their knowledge true and correct. Failure of this office to note all violation in the review of plans and specifications does not relieve the contractors of the responsibility of complying with applicable codes and regulations. The Building Official reserves the right to enter the construction premises at will during reasonable working hours.

APPLICANT'S SIGNATURE _____

PRINT NAME _____

DATE _____

_____	_____
ZONING APPROVAL Date	ZONE ENGINEERING DEPT