

7. Is this project located in the Floodplain? Yes No
 Is this project located on a Hillside Slope of 20% or greater? Yes No
 Is this project located within a Historic District? Yes No

8. Estimated cost of project: \$ _____

14. ACKNOWLEDGEMENT and AFFIDAVIT OF ASSURANCES (Notary Required):

I hereby certify that I am requesting this review on behalf of all owners of this property. All fees are due at the time of application and are not refundable, regardless of the decision of the Building Inspections, Planning Commission, Board of Adjustment and/or their authorized agent.

As applicant, I assure by this affidavit that all contractors and subcontractors employed or that will be employed, on activity covered by the permit shall be in compliance with Kentucky requirements for workers' compensation insurance according to KRS Chapter 342 and unemployment insurance according to KRS Chapter 341.

 Applicant's Affidavit Signature Date

<p>----- NOTARY -----</p> <p>The foregoing Affidavit of Assurance was acknowledged and sworn to before me by _____, Applicant, on this the ____ day of _____, 20____</p> <p>Notary Public State: _____ Notary ID: _____ My Commission Expires: _____, 20____</p> <p style="text-align: center; font-size: small;">(a notary is available at the PZ office)</p>
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Note: This Affidavit of Assurances shall be submitted for any project requiring a building permit. Persons claiming exemption to the Workers' Compensation Laws should file a Waiver with the Kentucky Department of Workers' Claims, Division of Security & Compliance, 657 Chamberlin Ave, Frankfort Kentucky 40601 (800) 554-8601.

Attachments:

- Two (2) sets of building plans, including fence/enclosure plans
 [Three (3) sets if located within the City of Alexandria or Bellevue.]
- Two (2) copies of site plan
 [Three (3) sets if located within the City of Alexandria or Bellevue.]
- List of all subcontractors – names and addresses

-----INFORMATION BELOW TO BE COMPLETED BY STAFF-----

BP - -	Fees Recd. \$ _____ Building Permit \$ _____ Zoning Permit \$ _____ Other \$ _____ Total	Date Recd. _____ <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check (#) _____
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Electrical Permit Application

CITY OF ALEXANDRIA

8236 West Main Street
Alexandria, Kentucky 41001

Phone: (859) 635-4125
Fax: (859) 635-4127

www.alexandriaky.org

1. Project Located In: Unincorporated Campbell County ***Only at City's Request**
- | | | | | |
|--------------|-------------|------------------|-------------|-----------|
| Alexandria | Bellevue | California | Cold Spring | Crestview |
| Dayton | Ft. Thomas* | Highland Heights | Melbourne | Mentor |
| Silver Grove | Southgate | Wilder* | Woodlawn | |

2. Project Name: _____

3. Project Address: _____

4. PIDN: 999-99-____ - ____ . ____

5. Subdivision: _____ Lot #: _____

6. Property Owner's Name: _____

Address: _____

City State Zip

Phone Number: _____ Email: _____

7. Contractor's Name: _____

Business Name: _____

Ky Electric License #: **ME -** _____ **CE -** _____

Address: _____

City State Zip

Phone Number: _____ Email: _____

Occupational Tax License #: County: _____ City: _____

8. Estimated Cost of Electrical Work Being Performed: \$ _____

9. Type of Structure:

Single Family Home Mobile Home Multi-Family Home Commercial Structure

Detached Garage Pole Barn Shed

Other: _____

10. Type of Work Being Performed:

New Construction New Service Panel Repair Addition

Alteration Other: _____

11. For Electrical Inspections: Contact One of the following State-Certified Electrical Inspectors listed below. The same inspector must perform all inspections on this project.

Electrical Inspection, Inc. (859) 746-9111 Alexandria City Limits must use Electrical Inspection, Inc.
 Inspection Bureau Inc. (513) 381-6080

12. SIGNATURE: I hereby certify that I am requesting this permit on behalf of all owners of the property and that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit.

No work shall begin until the proper permits have been issued. If work begins prior to issuance of a permit, all fees may be subject to a penalty equal to the total cost of the permit. The applicant is responsible for meeting all requirements of the Kentucky Building Code and local zoning ordinances. All fees are nonrefundable.

For all applications, pursuant to KRS 198B.060(10), all Contractors and Sub-Contractors employed or that will be employed on any activity under the above referenced project shall be in compliance with the Commonwealth of Kentucky requirements for Workers' Compensation Insurance (according to KRS Chapter 342) and Unemployment Insurance (according to KRS Chapter 341).

For all work completed by the homeowner, I certify that I am the owner of the above referenced property and that I currently reside at that location, or am constructing the home for use as my personal residence, and that I personally perform all work on the Electric and/or HVAC system. All work shall conform with the Kentucky Residential Code and 815 KAR 8:070. I further state that I have not been issued a Homeowner's Electric and/or HVAC Permit for any location in the State of Kentucky in the last five (5) years.

For all Farm Exempt permits, I attest to the fact that the said property will be used for agricultural purposes on the property. Any barn or accessory structure will not be used or converted to a dwelling, living quarter or non-agricultural commercial space without an approved zoning permit indicating this use.

 Print Name

 License Holder's Signature Date

The following documents are **required** to be submitted with all applications

Homeowner's Insurance Certificate when self-construction

INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL

APPLICATION #'s:

Building: _____

Electric: _____

Current Zone: _____

FEE	DESCRIPTION	Code
\$	Electric Permit	ELECPMT
\$	Other	LATEPEN / CREDITCARD
\$	TOTAL AMOUNT DUE	

DATE RECD: _____

- Approved
 Approved with conditions
 Denied

Processed By: _____

- Cash
 Check #: _____

Check Name: _____



CITY OF ALEXANDRIA
8236 WEST MAIN STREET
ALEXANDRIA, KY 41001
(859) 635-4125
FAX (859) 635-4127

APPLICATION FOR ZONING PERMIT

APPLICANT: Property Owner Contractor PERMIT #: _____

PROPERTY LOCATION: _____

PROPERTY OWNER: _____ PHONE #: _____

EMAIL: _____

CONTRACTOR: _____ CONTACT: _____

ADDRESS: _____
Street City ST Zip

PHONE: _____ EMAIL: _____

PROPOSED ZONING ACTIVITY: (Mark all that apply)

- | | | | | |
|------------------|------------|--------------------|-------|---------------|
| New Construction | Alteration | Off-street Parking | Sign | Corner Lot |
| Addition | Demolition | Accessory Building | Fence | Change of Use |
| Other _____ | | | | |

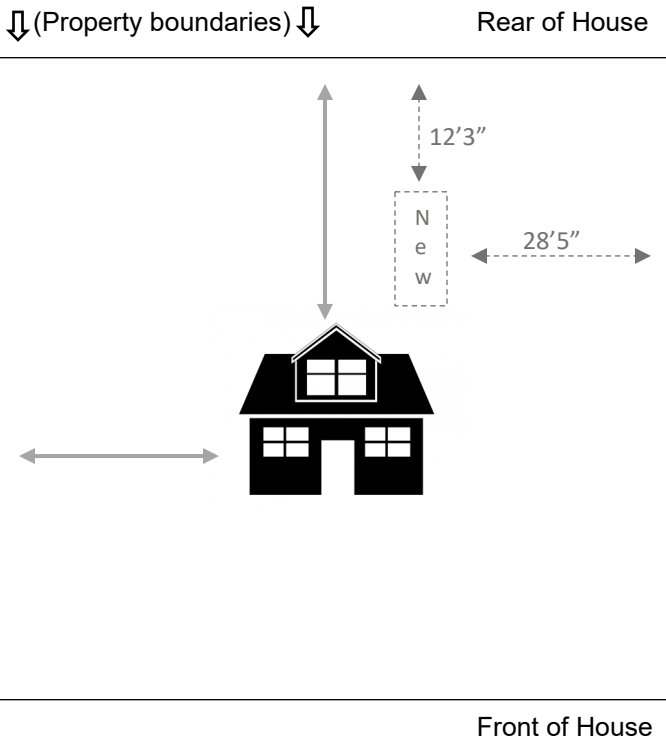
Description: _____ Estimated Cost: _____

- NOTE:** 1) In order to do business in the City of Alexandria, all contractors and subcontractors must have a current Occupational License with Campbell County AND Alexandria.
 2) You are required to complete the attached SUBCONTRACTOR form and return it with the application.
 3) You are required as a contractor, to attach proof of Worker's Compensation Insurance; if you hire subcontractor(s), you are responsible for making sure they have current Worker's Compensation Insurance.

FOR OFFICE USE ONLY

Date Received: _____	Does Contractor have Occupational License? Y _____ N _____
Date Approved: _____	Approved By: _____ Zoning Fee: _____
Zoning Permit #: _____	Date C.O. Issued: _____ Other Fee: _____
Notes: _____	Total Fees: _____

1. Using the below diagram as a reference, in the comments section, please include the following information:
 - a) Include all **existing** and **proposed** structures, including dimensions and height.
 - b) **Indicate Setbacks:**
 - Front yard setback is the distance from the road right-of-way to the proposed addition or existing building.
 - Side & rear setbacks are measured from the proposed structure to the property line.
 - c) **Is this house located on a corner lot? _____**
 - **If so, please indicate the street locations next to the drawing below or in the comments.**
 - d) Locate existing driveway, parking and sidewalk if affected by proposed project.
 - e) A drainage plan of lot, showing general direction of drainage and its relationship to adjacent property.
2. Include a drawing/print of the proposed structure (i.e. fence, pool, shed, etc.)



SETBACK (← →):

A setback is the distance measured from the property line to the nearest point of the proposed improvement. Please mark the setback in "feet" and "inches".

Comments: _____

The above information & attachments are true and accurate to the best of my knowledge.

 Date

 Signature

**CITY OF ALEXANDRIA
Sub-Contractors List for**

Address and Lot Number on Application

Please Complete ALL Information

****Current Alex. Occ. Lic. REQUIRED**

PHASE	BUSINESS NAME	ADDRESS	**OCC LIC #	PHONE
GEN CONTRACTOR				
SUB CONTRACTOR				
EXCAVATION				
FOOTER/FOUNDATION				
FRAMING				
INSULATION				
HVAC				
PLUMBING				
ELECTRIC				
DRYWALL				
CONCRETE				
MASONRY				
ROOFING				
SIDING				
GUTTERS				
FLOORING				
GARAGE DOORS				
PAINTING				
TILE WORK				
DECK				
LANDSCAPE				
OTHER				
OTHER				