



Commercial or Multi-Family Permit Packet – Remodel or Addition

IMPORTANT INFORMATION. PLEASE READ FIRST.

This application packet is for commercial buildings or multi-family buildings permits: remodels or additions to existing structures.

Below applications/documents are required:

- Zoning Permit application
- Electric Permit application (if applicable)
- Commercial or Multi-Family Building Permit application
- Site plan (must show where the structure will be placed in reference to property lines. Distance should be a close estimate, for a new build you will need to show where driveway will be located.)
- Building plans (Campbell County Building Dept. will require structural plans for the project.)
- Proof of current Occupational License for the City of Alexandria (For contractors only)
- Sub-contractor list (if applicable)

Fees:

- Zoning Permit fee: \$50.00
- Electric Permit fee: \$30.00 (times number of units – for multi-family only)
- Building Permit fee: Price based on square footage of project

How to apply:

Return the completed packet and all necessary documents to forms@alexandriaky.org. Fees will be paid to Campbell County Planning & Zoning and can be paid via check, credit card or cash.

Once the zoning is approved the packet will be delivered to Campbell County who will reach out for payment and issue the permit. This process can take up to 2 weeks.

If you have specific building questions contact Campbell County Building Dept: 859-292-3880.

Zoning Permit Application

CITY OF ALEXANDRIA

8236 West Main Street
Alexandria, Kentucky 41001

Phone: (859) 635-4125

Fax: (859) 635-4127

Email: forms@alexandriaky.org

www.alexandriaky.org



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
Above Ground Pool	In Ground Pool	Driveway	Patio	Deck
Other _____				

Description: _____ Estimated Cost: _____

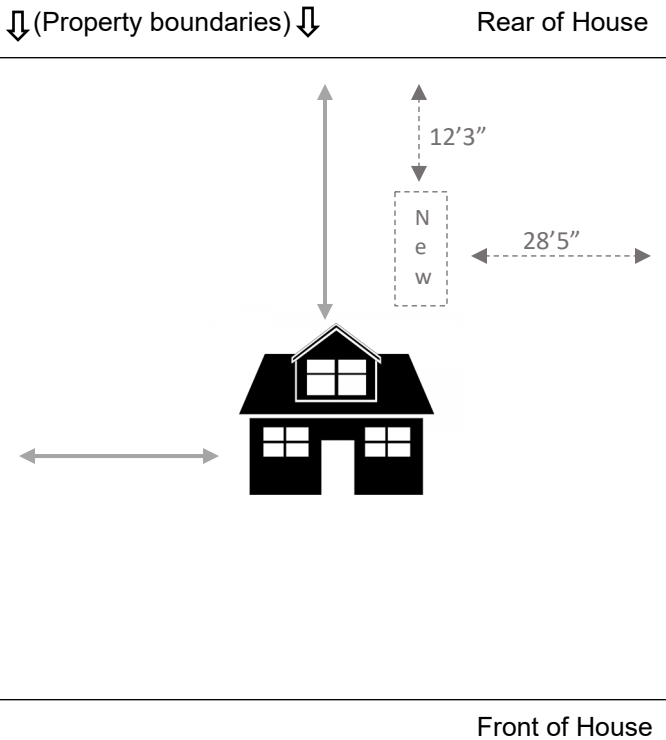
***NOTE: 1) In order to do business in the City of Alexandria, all contractors and subcontractors must have a current Occupational License with Campbell County AND Alexandria.**

2) You are required to complete the attached SUBCONTRACTOR form and return it with the application.

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



Electrical Permit Application

CITY OF ALEXANDRIA

8236 West Main Street
Alexandria, Kentucky 41001

Phone: (859) 635-4125
Fax: (859) 635-4127
Email: forms@alexandriaky.org
www.alexandriaky.org

1. Applicant: Property Owner Contractor Permit #: _____

2. Project Address: _____
City: _____ State: _____ Zip: _____

3. PIDN: 999-99-____ - ____ . ____

Contractor: _____ Permit Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

<p>License Holder Signature:</p> <p>_____</p> <p>ME: _____ CE: _____</p>

Occupational Tax License number: _____
County _____ City _____

Property Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

4. Type of structure:

Single Family Home	Commercial Structure	Shed
Mobile Home	Detached Garage	Other: _____
Multi-Family Home	Pole Barn	

Is this structure in the Floodplain? Yes No

5. Type of project:

New Construction	Alteration / Repair	Other: _____
New Service Panel	Addition	

Estimated cost \$ _____

6. Electrical Inspection Contact: **Electric Inspection, Inc** **859-746-9111**

<i>FOR OFFICE USE ONLY</i>		
Date Recd: _____	Fees Recd	Payment Method
Processed by: _____	\$ _____ Electric	Credit Card
	\$ _____ Other	Check (#) _____
	\$ _____ Total	Cash
		Pd to Campbell County P&Z



CAMPBELL COUNTY | KY

Commercial and Multi Family Building Permit Application

Campbell County Planning, Zoning and Building Inspection
1098 Monmouth Street, Suite 343
Newport, Kentucky 41071

Phone: (859) 292-3880
Fax: (859) 547-1868
Email: pzadmin@campbellcountyky.gov

www.campbellcountyky.gov

1. Project Located In:

- Unincorporated Campbell County
Alexandria Cold Spring Ft. Thomas Southgate
Bellevue Crestview Highland Heights Wilder
California Dayton Melbourne Woodlawn
Silver Grove

2. Project (Business) Name or Description:

Project Address:

City: State: Zip: PIDN: 999-99- - - - -

3. Applicant: Engineer/Architect Contractor Property Owner

Engineer/Architect: Contact:

Address:

City: State: Zip:

Phone: Email:

Contractor: Contact:

Address:

City: State: Zip:

Phone: Email:

Occupational Tax License: County issued number City issued number

Property Owner:

Address:

City: State: Zip:

Phone: Email:

4. Type of structure: Commercial Industrial Multi-Family

5. Estimated cost of project \$

6. Proposed Activity:

- New Construction Remodel Tenant Finish Addition Accessory Structure
Range Hood Hood Extinguish Sys. Retaining Wall Roof Replacement Fire Alarm
Fire Suppression Sprinkler Sys. # of heads: Other:

7. Group Classification (KBC Ch.3) _____ Construction Type (KBC Ch.6) _____

Number of Stories (including basement): _____ Number of units: _____

Building Square Footage: _____ Square Footage of Remodel Area: _____

Occupant load: _____

8. Verification of International Energy Conservation Code:

- Performance: Blower Door Test (by third party)
- Prescriptive: Visual Inspection (by Building/HVAC Inspector)

9. Is this project located in the Floodplain? YES NO

10. Is this project located on a Hillside Slope of 20% or greater? YES NO

11. Is this project located in a Historic District? YES NO

12. ACKNOWLEDGEMENT:

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.

Applicant's Signature

Date

ATTACHMENTS (HVAC and Electrical to be submitted separately):

Digital submissions accepted at pzadmin@campbellcountyky.gov

- | | | |
|---|---|---|
| <input type="checkbox"/> Three sets of building plans
<i>(Four for Alexandria or Bellevue) *</i> | <input type="checkbox"/> List of subcontractors (Names
and Addresses) | <input type="checkbox"/> Truss Drawings |
| <input type="checkbox"/> Two sets of site plan <i>(Three for
Alexandria or Bellevue) *</i> | <input type="checkbox"/> Certificate of Appropriateness
<i>(Historic District)</i> | <input type="checkbox"/> Fire Alarm/Suppression Plans |
| <input type="checkbox"/> Encroachment Permit | <input type="checkbox"/> Permit Fees | <input type="checkbox"/> Range Hood Plans |
| | | <input type="checkbox"/> Elevator Plans |

**Only one if submitted digitally.*

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

BP	Fees Recd.	Date Recd. _____
	\$ _____ Bldg. Permit	<input type="checkbox"/> Credit Card
	\$ _____ Zoning	<input type="checkbox"/> Cash
	\$ _____ Enchrmt. Permit	<input type="checkbox"/> Check (#) _____
	\$ _____ Chng of Use	
	\$ _____ Range Hood	
	\$ _____ Ext. System	
	\$ _____ Fire Alarm	
	\$ _____ Sprinkler	
	\$ _____ Other	
	\$ _____ Total	

**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				