

Sign 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:

<input type="checkbox"/> Unincorporated Campbell County	<input type="checkbox"/> Dayton	<input type="checkbox"/> Southgate
<input type="checkbox"/> Bellevue	<input type="checkbox"/> Melbourne	<input type="checkbox"/> Woodlawn
<input type="checkbox"/> Cold Spring	<input type="checkbox"/> Silver Grove	
<input type="checkbox"/> Crestview		

2. Project Address: _____
 City: _____ State: _____ Zip: _____
 Project (Business) Name: _____

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

4. Applicant: Business or Property Owner Contractor

 Business or Property Owner: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

 Contractor: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

 Occupational Tax License: _____ _____
 County issued number City issued number

5. Number of signs: _____

6. Sign Types: *(check all that apply)*

<input type="checkbox"/> New Sign	<input type="checkbox"/> Replacement Sign	<input type="checkbox"/> Ground or Monument Height at top: _____ FT.
<input type="checkbox"/> Flat or Window		<input type="checkbox"/> Pole Height at top: _____ FT.
<input type="checkbox"/> Projecting from Building		
<input type="checkbox"/> Individual Letters		
<input type="checkbox"/> Logo		

7. Lighting: Internal External None
 Hours of Illumination: 24 hours From _____ AM/PM to _____ AM/PM

8. Variable Message:

Size of Variable Message Portion: _____ Square FT.

Electronic Manual None

Monochrome Multi-Color

Anticipated Frequency of Message Change: _____

9. Size of each sign: Single Sided Double Sided

Depth: _____ FT. Length: _____ FT. Height: _____ FT.

Single Sided Double Sided

Depth: _____ FT. Length: _____ FT. Height: _____ FT.

Single Sided Double Sided

Depth: _____ FT. Length: _____ FT. Height: _____ FT.

10. Estimated cost of project: \$ _____

11. 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: *Digital submittals accepted at pzadmin@campbellcountyky.gov*

Two sets of Sign Plans

One copy of Site Plan

List of Subcontractors (names and addresses)

If applicable:

Building permit application

Electrical permit application

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

BP

\$ _____ Building Permit

\$ _____ Zoning Permit

\$ _____ Electric Permit

\$ _____ Other

\$ _____ Total

Date Received _____

Credit Card

Cash

Check (#) _____



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

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: _____

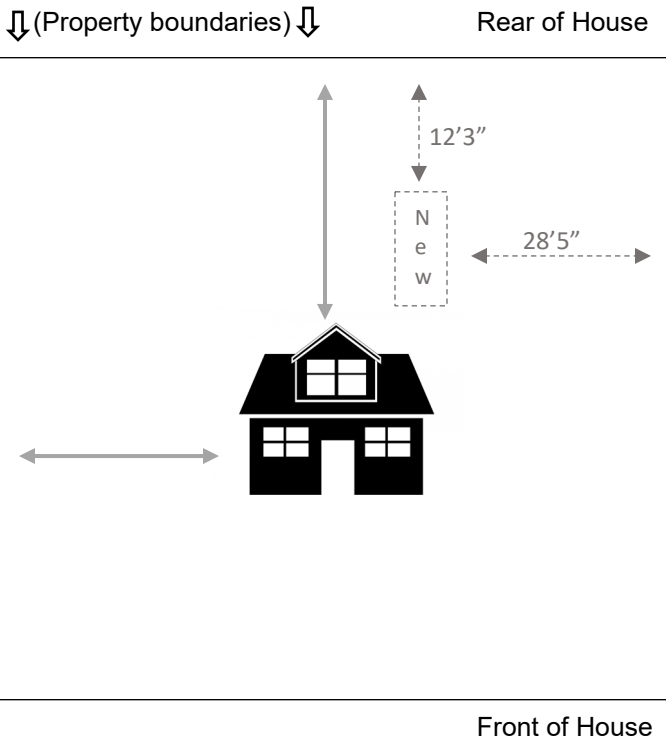
***NOTE: 1) In order to do business in the City of Alexandria, all contractors and subcontractors must have a current Occupational License with Campbell County AND Alexandria.**

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

**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				