

# RESIDENTIAL BASEMENT FINISH APPLICATION

GEORGETOWN / SCOTT COUNTY BUILDING INSPECTION

100 North Court Street - Georgetown, KY 40324

Phone: (502) 863-9802 Fax: (502)863-4169

E-mail: [Inspector@georgetownky.gov](mailto:Inspector@georgetownky.gov)

<b>Project Address:</b>		
Subdivision:	Lot #:	Lot Size:
Owner name:		Owner phone:
Owner address:		
City:	State:	Zip code:
Construction Cost: \$	Sewer <input type="checkbox"/> Septic* <input type="checkbox"/> (Site Evaluation Required)	
Applicant is: Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Both <input type="checkbox"/>		
<b>Contractor Information</b>		
Contact name:		
Company name:		
Phone:	Fax:	
E-mail:		
<b>Structure Dimensions</b>		
Length:	Width:	Height:
# of Rooms:		
<b>Square Footage Calculations</b>		
TOTAL Sq/Ft:		
<b>Permit Fee</b>		
Fast Track (Reviewed within 24 hrs)	\$100	
Cost Fee Schedule (per chart)		
<b>TOTAL PERMIT FEE</b>		
<b>Acknowledgement</b>		
<p><b>Applicant Signature</b> _____ <b>Date</b> _____</p> <p>I certify that all information contained in this application is accurate to the best of my knowledge and that a complete set of construction documents has been included with my application.</p>		

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OFFICE USE ONLY: PLAN REVIEW	
Permit #	
Date Received:	Jurisdiction: G SC SG Sadie.
Receipt #:	Check # _____ CASH CC
Finish Floor Elevation Yes <input type="checkbox"/> No <input type="checkbox"/>	
SWALE Certificate Yes <input type="checkbox"/> No <input type="checkbox"/>	
Flood Plain Yes <input type="checkbox"/> No <input type="checkbox"/>	
Zone:	Setbacks: F- S- R-
Use Group: R-3	Const. Type:
Plan Reviewed by:	Date: