

RESIDENTIAL ADDITION PERMIT 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

Project Address:		
Subdivision:	Lot #:	Lot Size:
Owner name:		Owner phone:
Owner address:		
City:	State:	Zip code:
Select a descriptions: Room <input type="checkbox"/> Bath <input type="checkbox"/> Porch <input type="checkbox"/> Sunroom <input type="checkbox"/> Other <input type="checkbox"/> _____		
Construction Cost: \$	Sewer <input type="checkbox"/> Septic* <input type="checkbox"/> (Site Evaluation Required)	
Applicant Information		
Applicant is: Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Both <input type="checkbox"/>		
Name:	Phone:	
Company:		
Address:		
City:	State:	Zip code:
E-mail:		
Contractor Information		
Contact name:		
Company name:		
Phone:	Fax:	
E-mail:		
Structure Dimensions		
Length:	Width:	Height:
Stories:	# of Bedrooms:	# of Bathrooms:
Foundation		
Slab <input type="checkbox"/>	Crawl <input type="checkbox"/>	Other <input type="checkbox"/>
Basement: Unfinished <input type="checkbox"/> Finished <input type="checkbox"/>		
House Options		
Fireplace: Yes <input type="checkbox"/> No <input type="checkbox"/>	New Floor Joist: Type	
Gas Fireplace Yes <input type="checkbox"/> No <input type="checkbox"/>	HERS Rated: Yes <input type="checkbox"/> No <input type="checkbox"/>	

RESIDENTIAL ADDITION PERMIT 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

Square Footage Calculations			
Living Area		Non-Living Area	
	1 st Floor		Garage
	2 nd Floor		Porch
	Finished Basement		Un-finished Basement
	Other		Other
	Living Sq/Ft		Non-Living Sq/Ft
TOTAL SQ/FT			
Permit Fee			
Fast Track (reviewed within 24 hrs)		\$100	
\$.12 per sq/ft (min of \$100)			
TOTAL PERMIT FEE			\$
<small>*Additions Permit Fee shall not be less than \$100</small>			
Acknowledgement			
<p>Applicant Signature _____ Date _____</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>			
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:	