



PLAN APPLICATION FORM

BULLITT COUNTY CODE ENFORCEMENT
140 N WALNUT STREET P.O. BOX 768
SHEPHERDSVILLE, KENTUCKY 40165

502- 921-2970 FAX: 502- 921-2972



NOTE: Complete all applicable spaces

Today's Date:

NAME OF PERSON SUBMITTING PLANS _____		Phone () - Ext _____	IS THE BCE PLAN REVIEW FEE INCLUDED WITH PLANS? <input type="checkbox"/> Yes <input type="checkbox"/> No	
MAILING ADDRESS: _____				
NUMBER / STREET, HWY, ROAD or P. O. BOX _____		CITY _____	STATE _____	ZIP CODE _____
BUSINESS & PROJECT NAME: _____				
(Or tenant name if multi-tenant building) PLEASE NOTE IF PROJECT IS INSIDE OR OUTSIDE LIMITS OF CITY NOTED BELOW				
PROJECT LOCATION: _____		CITY _____	STATE KY	ZIP CODE _____
NUMBER/STREET, HWY OR ROAD (Please do not indicate P.O. Box or Postal Routes) _____		CITY _____	STATE _____	ZIP CODE _____
PROJECT LOCATED WITHIN CITY LIMITS? <input type="checkbox"/> Yes <input type="checkbox"/> No		COUNTY _____		
OWNER (INDIVIDUAL & COMPANY) _____		PHONE () - Ext _____		
MAILING ADDRESS: _____				
NUMBER / STREET, HWY, ROAD or P. O. BOX _____		CITY _____	STATE _____	ZIP CODE _____
ARCHITECT (NAME & FIRM) _____		PHONE () - Ext _____		
AS THE ARCHITECT LISTED ABOVE, I AM RESPONSIBLE FOR CONSTRUCTION CONTRACT ADMINISTRATION		<input type="checkbox"/> Yes <input type="checkbox"/> No		
MAILING ADDRESS: _____				
NUMBER / STREET, HWY, ROAD or P. O. BOX _____		CITY _____	STATE _____	ZIP CODE _____
NOTE: DESIGN CERTIFICATION REQUIRED. All buildings or structures requiring professional design (Architect or Engineer) by Section 122 of the 2007 KBC shall include a statement from the design professional in responsible charge indicating the Seismic Design Category for this specific site and the applicability of seismic bracing requirements for architectural, mechanical and electrical components and a statement to that effect shall be included with the initial construction documents submitted to the building code official having jurisdiction.				
ENGINEER (NAME & FIRM) _____		PHONE () - Ext _____		
MAILING ADDRESS: _____				
NUMBER / STREET, HWY, ROAD or P. O. BOX _____		CITY _____	STATE _____	ZIP CODE _____
PROJECT CONTRACTOR _____		PHONE () - Ext _____		
MAILING ADDRESS: _____				
NUMBER / STREET, HWY, ROAD or P. O. BOX _____		CITY _____	STATE _____	ZIP CODE _____
BUILDING INFORMATION				
NUMBER OF BUILDINGS IN THIS SUBMITTAL:		USE OF BUILDING(S) ie...restaurant, office, classroom, storage or other (please specify)		
BUILDING(S) IN THIS PROJECT IS / ARE:		<input type="checkbox"/> NEW FREESTANDING BUILDING	<input type="checkbox"/> NEW ADDITION TO EXISTING STRUCTURE	<input type="checkbox"/> RENOVATION ONLY
<input type="checkbox"/> RENOVATION & ADDITION				
TOTAL AREA IN NEW BLDG. OR ADDITION:	FT ²	NUMBER OF LEVELS (INCLUDING BASEMENT):	BASEMENT	<input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL AREA IN EXISTING BLDG.:	FT ²	DATE CONSTRUCTION TO BEGIN:	ESTIMATED COMPLETION DATE:	
TYPE OF PLAN SUBMITTALS				
BUILDING PLAN SUBMITTALS (Check the type of evaluations requested at this time)		SHOP DRAWING PLAN SUBMITTALS (Check the type of evaluations requested at this time)		
BUILDING PLAN REVIEW (BCE)		MECHANICAL PLAN REVIEW		
Full Building Review <input type="checkbox"/>	Expedited Site & Foundation Review <input type="checkbox"/>	HVAC Review <input type="checkbox"/>	Exhaust Systems Review <input type="checkbox"/>	HVAC Duct Systems Review <input type="checkbox"/>
Other (please specify) _____		Other (please specify) _____	Suppression System (Sprinkler, CO ² , Etc.) <input type="checkbox"/>	Alarm Systems <input type="checkbox"/>
			Boiler System <input type="checkbox"/>	Bleacher Seating <input type="checkbox"/>
			Range Hood System <input type="checkbox"/>	Fuel Tank <input type="checkbox"/>
			Elevator <input type="checkbox"/>	Swimming Pool <input type="checkbox"/>
			Prefabricated Truss <input type="checkbox"/>	
SUBMIT ONLY ONE SET FOR BCE		SUBMIT ONLY ONE SET OF PLANS FOR THE ABOVE		
TO BE COMPLETED BY PERSON SUBMITTING PLANS				
DESIGN CAPACITY OF BUILDING: (Occupancy) _____		ARE RESTROOMS ACCESSIBLE TO DISABLED AND/OR THE PUBLIC? <input type="checkbox"/> Yes <input type="checkbox"/> No		