

## **PLAN APPLICATION FORM**

P.O. BOX 250 OAK GROVE, KY 42262 (270) 439-4646



NOTE: Complete all	applica	able spaces			Today's Date	<b>:</b> :			
NAME OF PERSON		IS THE BCE PLAN REVIEW FEE YES							
SUBMITTING PLANS						INCLUDED W	ITH PLANS?		NO
PHONE: ( )		ext							
MAILING ADDRESS:			4						
EMAIL:					FAX:				
SEND APPROVAL LETTER VIA	: 🔲 ғ	AX 🔲	EMAIL	POSTAL	Į.				
BUSINESS & PROJECT NAME:									
(or tenant name if multi-tenant b	uilding)								
PROJECT									
LOCATION:									
IF PRE-EXISTING PROJECT PL	EASE NOT	E PREVIOUS NAM	√IE:						
PROJECT LOCATED WITHIN C	ITY LIMIT		YES $\square$	NO		COUNTY:			
OWNER (INDIVIDUAL & COMPANY)									
MAILING ADDRESS:									
EMAIL:			PHONE:			FAX:			
ARCHITECT (NAME & FIRM):									
AS THE ARCHITECT LISTED AI	BOVE, I A	M RESPONSIBLE F	FOR CONSTRUCT	ION CONTRACT	T ADMINSTRATION	: 🔲 \	'ES 🔲 N	10	
MAILING ADDRESS:									
EMAIL:					FAX:				
NOTE: DESIGN CERTIFICATION RE	QUIRED. /	All buildings or struc	tures requiring pro	fessional design (	Architect or Engineer)	by Section 122	of the 2007 KBC s	shall include a st	tatement
from the design professional in re									
mechanical and electrical compo- jurisdiction. This does not apply f			effect shall be inclu	ided with the initi	al construction docum	nents submitted	to the building co	official navi	ng
ENGINEER (NAME & FIRM):									
MAILING ADDRESS:									
EMAIL:			PHONE:			FAX:			
PROJECT CONTRACTOR:									
MAILING ADDRESS:									,
EMAIL:			PHONE:			FAX:			
				DING INFORM					
NUMBER OF BUILDINGS IN T	HIS		USE OF BUILDIN						
SUBMITTAL:		_	classroom, stor			<u> </u>			
BUILDING(S) IN THIS PROJEC	T: _	→ NEW FREESTA  →	ANDING BUILDIN	<b>IG</b>	RENOVATION ONLY				
		☐ NEW ADDITION TO EXISTING STRUCTURE				RENOVATION	ADDITION		
TOTAL AREA IN NEW BLDG C	PR	Sq Ft	NUMBER OF LE			BASEN	1ENT   Y	res 🔲 No	0
ADDITION: TOTAL AREA IN	-		(INCLUDING BA			ESTIMATED I	NATE OF		
EXISTING BLDG:		Sq Ft	TO BEGIN:	JCTION		COMPLETION			
LAISTING BLDG.				OF PLAN SUBM	IITTALS	CONFECTION	v.		
	BUILDING	G PLAN SUBMITTA				SHOP DRAWII	NG PLAN SUBN	 ЛITTALS	
(Check the type of evaluations requested at this time)					(Check the type of evaluationS requested)				
BUILDING PLAN REVIEW	PLUM	IBING PLAN REV	<u>IEW</u>	Suppression Sy	/stem	Prefal	bricated		
Full Building Review		Plumbing	Review ONLY		(Sprinkler, CO2	2, Etc.)	Truss		
Expedited Site &		Water Su	pply Review		Alarm Systems	. [	☐ Fuel T	ank	
Foundation Review		Waster W	Vater Review		Boiler Systems	[	☐ Elevat	tor	
		Other (ple	ease specify)		Bleacher Seati	ng [	Swimi	ming Pool	
					Range Hood Sy	/stem [			
SURMIT ONLY ONE SET FOR BCF					SUBMIT ONLY ONE SET OF DLANS FOR A POVE				