# PLAN APPLICATION FORM

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

NOTE: Complete all applicable spaces  Today's Date:

| | |
|---|---|
| NAME OF PERSON SUBMITTING PLANS | IS THE BCE PLAN REVIEW FEE INCLUDED WITH PLANS? ☐ YES ☐ NO |
| PHONE: (  )  ext | |
| MAILING ADDRESS: | |
| EMAIL: | FAX: |
| SEND APPROVAL LETTER VIA: ☐ FAX ☐ EMAIL ☐ POSTAL | |
| BUSINESS & PROJECT NAME: (or tenant name if multi-tenant building) | |
| PROJECT LOCATION: | |
| IF PRE-EXISTING PROJECT PLEASE NOTE PREVIOUS NAME: | |
| PROJECT LOCATED WITHIN CITY LIMITS? ☐ YES ☐ NO | COUNTY: |
| OWNER (INDIVIDUAL & COMPANY) | |
| MAILING ADDRESS: | |
| EMAIL: | PHONE: / FAX: |
| ARCHITECT (NAME & FIRM): | |
| AS THE ARCHITECT LISTED ABOVE, I AM RESPONSIBLE FOR CONSTRUCTION CONTRACT ADMINSTRATION: ☐ YES ☐ NO | |
| MAILING ADDRESS: | |
| EMAIL: | FAX: |

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. This does not apply for Plumbing submission only.

| | | |
|---|---|---|
| ENGINEER (NAME & FIRM): | | |
| MAILING ADDRESS: | | |
| EMAIL: | PHONE: | FAX: |
| PROJECT CONTRACTOR: | | |
| MAILING ADDRESS: | | |
| EMAIL: | PHONE: | FAX: |

**BUILDING INFORMATION**

| | | | |
|---|---|---|---|
| NUMBER OF BUILDINGS IN THIS SUBMITTAL: | | USE OF BUILDING(S) ie. .restaurant, office, classroom, storage or other (specify): | |
| BUILDING(S) IN THIS PROJECT: | ☐ NEW FREESTANDING BUILDING<br>☐ NEW ADDITION TO EXISTING STRUCTURE | ☐ RENOVATION ONLY<br>☐ RENOVATION & ADDITION | |
| TOTAL AREA IN NEW BLDG OR ADDITION: | Sq Ft | NUMBER OF LEVELS (INCLUDING BASEMENT) | BASEMENT ☐ YES ☐ NO |
| TOTAL AREA IN EXISTING BLDG: | Sq Ft | DATE CONSTRUCTION TO BEGIN: | ESTIMATED DATE OF COMPLETION: |

**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) | |
|---|---|---|---|
| **BUILDING PLAN REVIEW (BCE)** | **PLUMBING PLAN REVIEW** | Suppression System (Sprinkler, CO2, Etc.) ☐ | Prefabricated Truss ☐ |
| Full Building Review ☐ | Plumbing Review ONLY ☐ | Alarm Systems ☐ | Fuel Tank ☐ |
| Expedited Site & Foundation Review ☐ | Water Supply Review ☐ | Boiler Systems ☐ | Elevator ☐ |
| | Waster Water Review ☐ | Bleacher Seating ☐ | Swimming Pool ☐ |
| | Other (please specify) ☐ | Range Hood System ☐ | |
| *SUBMIT ONLY ONE SET FOR BCE* | SUBMIT 3 SETS OF PLANS FOR PLB | *SUBMIT ONLY ONE SET OF PLANS FOR ABOVE* | |