

Code Enforcement Division
200 North Lake Drive
Prestonsburg, KY 41653
Phone (606) 886-2335
Fax (606) 886-1044

City of Prestonsburg PERMIT APPLICATION

New Construction, Addition, Accessory Structures > 400 sq. ft.

For Office Use

Permit Number _____
Date Issued _____
Permit Type _____
Jurisdiction: State ___ Local ___
Zone _____ Use _____

Residential Commercial

APPLICANT – Please complete entire application

APPLICATION DATE: _____

I. Building Location

Address _____

Subdivision Name _____

Section _____

Lot Number _____

PERMIT REQUIREMENTS

___ Copy of recorded plat as recorded at the Floyd County Clerk's office or, if no plat is available, copy of recorded deed.

___ Site plan drawn to scale showing property lines, easements, right-of-ways, the dimensions of existing and proposed structures, with dimensions to property lines, and off street parking.

___ Drawing of relevant wall sections, floor plans, roof plans or truss diagrams to scale and labeled.

___ Window schedule for all, except accessory structures, including brand, model number, and size.

___ Existing and proposed floor plan for addition – including all adjacent rooms and existing window sizes to scale and labeled.

___ List of all contractors/subcontractors including City of Prestonsburg occupational license, workman's compensation, and unemployment information.

___ Receipt for tap fees.

II. Contact Information

Building Occupant:

Name _____

Phone # _____ Cell # _____

Address _____

City, State, Zip _____

Building Owner:

Name _____

Phone # _____ Cell # _____

General Contractor:

Name _____

Phone # _____ Cell # _____

Address _____

City, State, Zip _____

Prestonsburg Occupational License Number _____ Workman's Compensation _____ Affidavit _____

III. Permit Information

Scope of Work:

New (Number of units _____)

Addition

Accessory

Brief Description of Project _____

Est. Cost of Construction \$ _____

Estimated Electric Contract \$ _____
(Commercial / Industrial Only)

IV. Building Characteristics

Construction Type: 5B (combustible) _____
2C (noncombustible) _____

Dimensions: Length _____
Width _____
Height _____
Total Sq. Footage _____

PROJECT ADDRESS:

V. Subcontractors

Excavation
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Roofing
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Concrete
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Plumbing
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Masonry
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Electrical
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Framing
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Heating & A/C
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Drywalling
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Painting
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Flooring
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Landscaping
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Insulation
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Siding
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Other
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Other
Address
City, State, Zip
Phone #'s
Workman's Comp. Affidavit

Attach a listing of all subcontractors who perform work at the site but do not appear on this form. The Code Enforcement Division will not issue a Certificate of Occupancy for new construction until this form has been submitted.

VI. Affirmation Statement

The owner of this building and undersigned do hereby covenant and agree to comply with all the applicable regulations pertaining to building, zoning and to construct the proposed building or structure to make the proposed change or alteration in accordance with the plans and specifications submitted herewith and certify that the information and statements given on this application, drawings and specifications are, to the best of my knowledge, true and correct, and that the proposed change or alteration will not alter the existing drainage patterns.

Application by
Owner or Agent's Signature

Date