



**APPLICATION FOR DEVELOPMENT (ZONING) PERMIT
CITY OF LOUISVILLE**

Date _____ Site Address _____ Estimated Cost \$ _____

Property Owner(s) Name: _____

Address _____ Phone _____

Registered Contractor/Applicant Name: _____

Address _____ Phone _____

PLEASE CHOOSE ZONING PERMIT YOU ARE APPLYING FOR (ONE APPLICATION PER PERMIT):

Please note, projects below may require more than one City permit.

\$75.00 City Permit Fee		\$200.00 City Permit Fee
<input type="checkbox"/> New Residence (per unit)	<input type="checkbox"/> Deck	<input type="checkbox"/> Commercial/Industrial Development Type _____
<input type="checkbox"/> Addition	<input type="checkbox"/> Fence	\$65.00 City Permit Fee
<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Pergola	<input type="checkbox"/> Parking Lot (+ \$5 per parking space)
<input type="checkbox"/> Garage	<input type="checkbox"/> In-Ground Pool	\$15.00 City Permit Fee
<input type="checkbox"/> Driveway	<input type="checkbox"/> Above Ground Pool	<input type="checkbox"/> Sidewalk Repair/Replace
<input type="checkbox"/> Patio	<input type="checkbox"/> Other _____	

1. Submit a site plan drawing indicating the following:	2. Complete below information regarding the property & project:		
1. Name, address & phone of owner/applicant 2. Address and lot number of site to be developed 3. Dimensions of lot including a "North" arrow 4. Front, side and rear yard setbacks of project 5. Scale of drawing 6. Location, length, width and height of structure(s) 7. Existing easements on site 8. Square footage of existing buildings & proposed project 9. Location of all drives and access 10. Location of utility connections		Code Requirements:	Actual Total:
	Lot Area		
	Building Floor Space		
	Front Yard Setback		
	Side Yard Setback		
	Side Yard Setback		
	Rear Yard Setback		
	% Total Lot Coverage		

By signing, the applicant is consenting to the City's entry onto the property for inspection purposes. Any costs associated with engineering or site inspections of your project will be the applicant's responsibility (if incurred).

Signature of Applicant _____ **Date** _____

<u>For Office Use Only:</u>			
City Permit Fee _____	Permit Number _____	Zoning District _____	
Lot # _____	Parcel # _____	Easements: None _____	If Yes, Explain _____

Approved____ Denied____ Zoning Inspector_____ Date _____