

# Commercial Permit/Plan Review Application

CITY OF SHELBYVILLE

Please submit this form with a COMPLETE set of plans, (including, but not limited to, construction drawings, site plans, height & area calculations, elevations, etc.), to the following agencies.

**Division of Code Enforcement**  
**315 Washington Street**  
**Shelbyville, Kentucky, 40065**

Please provide the following information

**Project Address:** \_\_\_\_\_ **Suite#:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

To Confirm the Correct Project Address Call Shelby County Triple S Planning & Zoning

**Business Name:** \_\_\_\_\_

**Owner or Applicant:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Business License:** Yes No

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Architect Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Engineer Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Firm Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

~~~~~Please check which best describes your project~~~~~

New Building:  Building Addition:  Fit-Up:  Remodel:

Change of Use:  Fire Repair:  Sprinkler System:  Alarm :

Other: Describe on lines provided below

\_\_\_\_\_

~~~~~General Building Information~~~~~

2013 KBC Construction Type: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Sq. Ft. per Floor: \_\_\_\_\_

Remodel/Fit-up Sq. Ft: \_\_\_\_\_ 2013 KBC Use Group: \_\_\_\_\_ Construction Cost: \_\_\_\_\_

Basement? : Yes ( ) No ( ) Fire Alarm? Yes ( ) No ( ) Sprinkler System? Yes ( ) No ( )

**Commercial Permit:** \_\_\_\_\_ sq. ft. X \$ 0.16 sq. ft. ....\$ \_\_\_\_\_

**Plan Review Fee: \$ 75.00, all permits subject to Administration \$5.00 Fee: \$ \_\_\_\_\_**

**Local Permit (in addition to State Fees) \_\_\_\_\_ sq. ft. X \$ 0.06 sq. ft...\$ \_\_\_\_\_**

**Total Permit Fee: \$ \_\_\_\_\_**

**Paid by: Owner:**  **Contractor:**  **Agent:**  **Check #** \_\_\_\_\_

The Undersigned hereby certifies they are the owner or the owner's agent of the property and that all information is true and accurate to the best of their knowledge.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_