



City of Bowling Green
 Neighborhood and Community Services
 1017 College Street
 P O Box 430
 Bowling Green, Ky. 42102-0430
 Phone: (270) 393-3676
 Fax (270) 393-3223
 Web: bgky.org

Building Permit Application

Please print clearly in Ink or Type.

PERMIT #	BC		2012 -
	BR		

1.0) Parcel ID # Filing Date: _____

1.1) Permit's Address: _____ Suite/Apt # _____ Zip Code _____

1.2) Subdivision : _____ Lot #: _____ Project Name: _____

1.3) Permit Construction Activity: *(Check one which applies)*
 New Addition Alterations/Repairs

1.4) **Items Required:**

1.4.1) Sketch Plan is sufficient for new construction or addition under 750 square feet.
 Plot Plan needed for new construction or addition over 750 square feet.

1.4.2) If the plot plan is larger than 11x17 (paper size), then you must provide five(5) copies.

1.4.3) See Section 122, Kentucky Building Code, Table 122.1 Design Professional Seals for Requirements. If Required, you must provide three (3) sets of drawings.

1.4.4) Must complete attached standard EPSC form if submitting at a plot plan level unless an engineered grading & drainage plan has been required by City Ordinance 21-2.03 and includes EPSC measures.

1.4.5) A City of Bowling Green Erosion Prevention & Sediment Control (EPSC) Certified Contractor must be identified below (2.5) for all permits at a plot plan level and above.
(Permits will not be approved unless this information is provided. Effective April 1, 2006)

1.5) General Description of Use and Construction Activity: _____

(Skip this line, Office Use Only) Use Group: _____ Zoning: _____ Const. Type: _____

Code Enforcement by... 2007 Kentucky Building Code 2007 Kentucky Residential Code City Ordinance

1.6) Square Footage: Existing _____ New _____ Total _____ # of Stories _____

1.7) Total Square Footage/Acreage to be disturbed: _____

1.8) Number of Buildings _____ Total Number of Units for all Buildings _____

1.9) Construction Cost: \$ _____ Construction Start Date _____ End Date _____

2.0) **Applicant** _____ Day Phone : _____ - _____

2.1) Address _____ Suite/Apt # _____ Evening : _____ - _____

2.2) City _____ State _____ Zip _____ Fax : _____ - _____

2.3) Email Address _____ Mobile : _____ - _____

2.4) Check all that apply to Applicant's Roll... Contractor Property Owner Lessee Other _____

2.5) EPSC Certified Contractor _____ Certification # _____

Contractor is Required to be properly Licensed to work in the City of Bowling Green.
If Contractor or Property Owner are different from Applicant then fill-in back page.

3.0) **I the Applicant of this Permit do hereby understand the following:**

- a.) This Permit will be issued when all Reviews have been approved or the Building Inspector may issue the permit subject to approvals which have not yet been approved.
- b.) It will be the Applicant's responsibility to meet all conditions for all Plan Review Approvals which have either been or not been approved.
- c.) Work cannot commence until the permit is issued by the Building Inspector and all fees have been paid.
- d.) This permit is subject to conditions set-forth by the Building Inspector and/or his plan reviewers.
- e.) Kentucky Building Code, Current Edition with referenced codes and City Ordinances will govern this permit.
- f.) Phase 2 Erosion Prevention & Sediment Control Practices will be implemented during all phases of construction as defined in City Ordinance 21-2.03
- g.) A list of Sub-contractors is to be submitted to Occupational License Division prior to the issuance of this permit.
- h.) To the best of my knowledge all information given herein is true.

PERMIT #

BC	
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 2012-

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1.1) Permit Address: _____

If Contractor is not the Applicant, fill-in Contractors Information:

4.0) Contractor _____ Day Phone: _____ - _____
 4.1) Address _____ Suite/Apt # _____ Evening Phone: _____ - _____
 4.2) City _____ State _____ Zip _____ Fax: _____ - _____
 4.3) Email Address _____ Mobile: _____ - _____

If Property Owner is not the Applicant, fill-in Property Owner's Information:

5.0) Property Owner _____ Day Phone: _____ - _____
 5.1) Address _____ Suite/Apt # _____ Evening Phone: _____ - _____
 5.2) City _____ State _____ Zip _____ Fax: _____ - _____
 5.3) Email Address _____ Mobile: _____ - _____

Office Use Only: Plot Plan NOT Required Construction Drawings NOT Submitted Number Drawings Submitted

Inspections Required

- Site
- Footings
- Foundation
- Concrete Floors
- Under Floor Framing
- Framing or Structure
- Vent / Ducts Rough-in
- Lath/Gypsum Board
- Fire Assembly Penetrations
- Final

Reviews Required:

	Date	Reviewer	A	D
<input type="checkbox"/> Airport Bd	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> BGMU Water	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Sewer	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Electric	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PW	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PZ	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> WCWD Water	/ /	_____	<input type="checkbox"/>	<input type="checkbox"/>
Sewer	/ /	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Reviews not required.				

Summary of Permit Fees

	Quantities	Amount
Occupancy	_____	\$ 3.00
Construction	_____	\$ _____
Pouch Protector	_____	\$ _____
Plan Review	_____	\$ _____
Fast-track Fee	_____	\$ _____
Sprinklers	_____	\$ _____
Fire Detection	_____	\$ _____
Standpipe	_____	\$ _____
Carbon Dioxide	_____	\$ _____
Clean Agent	_____	\$ _____
Foam Suppression	_____	\$ _____
Com. Range Hood	_____	\$ _____
Dry Chemical	_____	\$ _____
EPSC Fee	_____	\$ _____
Total...		\$ _____

Reviewer's Comments:

a) Filing Processor: _____
 b) Plan Review Referred to: _____
 c) HCD Reviewer: _____
 d) Issuance Processor: _____
 e) Check if Page 3 is not Required

PERMIT #

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 2011-

City of Bowling Green
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1.1) Permit Address: _____

6.0) **Building Specifications:**

6.1) See table 122.1 of the Kentucky Building Code for when a Design Professional Seal is Required on Construction Documents.

6.2) Are you submitting a complete set of Architectural Drawings? YES NO

7.3) If you checked YES then list the Architect's information and do not fill out the rest of Section 7 of this application, we will refer to the construction documents.

7.4) Architect/Engineer _____ Day Phone: _____ - _____
 7.5) Address _____ Suite/Apt # _____ Evening Phone: _____ - _____
 7.6) City _____ State _____ Zip _____ Fax: _____ - _____
 7.7) Email Address _____ Mobile: _____ - _____

7.8) **STOP HERE IF YOU CHECKED YES ON LINE 7.2**

7.9) Type of Construction: Wood Frame Masonry Steel Frame Other: describe.. _____

7.10) Sanitation Disposal: Sewer Septic Other: describe.. _____

7.11) Footing:

Concrete PSI	Rebar Size	Width (inches)	Depth (inches)	Excavation Depth (inches)

7.12) Foundation: Concrete Block Formed Concrete Other: _____ Height _____ Thickness _____

7.13) Concrete Floors:

Rock Fill Depth	Concrete PSI	Concrete Depth (Inches)	Reinforcement	Insulation Thickness	Insulation Depth	Other

Materials:

	<u>Material/Species</u>	<u>Mill Grade</u>	<u>Lumber Size</u>	<u>Spacing</u>	<u>Clear Span</u>
7.14) Beams / Girders	_____	_____	_____ X _____	_____	_____
7.15) Walls	_____	_____	_____ X _____	_____	_____
7.16) 1st floor	_____	_____	_____ X _____	_____	_____
7.17) 2nd floor	_____	_____	_____ X _____	_____	_____
7.18) Ceiling Joist	_____	_____	_____ X _____	_____	_____
7.19) Rafters	_____	_____	_____ X _____	_____	_____
7.20) Roof	_____	Roof Felt lbs. _____	_____	Roof Pitch _____	_____
7.21) Insulation	R-Value.... _____	Floors _____	Walls _____	Ceilings _____	
7.22) HVAC	_____ AC Tonnage _____	Heat BTU _____	<input type="checkbox"/> Heat Pump <input type="checkbox"/> Gas		
7.23) Quantities...	_____ # of Bathrooms	_____ # Fire Exits	_____ # Smoke Detectors		
7.24) Parking.....	_____ Width	X _____ Length	= _____ Square Feet		

7.25) Parking Surface must be Paved with Blacktop, Concrete or other approved surface.

Asphalt Concrete Other: describe.. _____



STANDARD EPSC PLAN FOR PLOT PLAN

This form can serve as the EPSC plan if the following conditions are met:

- Disturbs less than 1 acre, and
 - Adds less than 3400 sq. ft. of new impervious surfaces, and
 - Contains no critical slope or flood hazard areas.
- Otherwise, a detailed EPSC plan, prepared by an appropriate professional will be required.

PERMIT # _____

Address of Permit Site: _____

If questions, please contact the Public Work Department at (270) 393-3628.

Please read and complete the bottom of this form before completing this section.

For plot plans, choose one of the following options:

? The most appropriate, from the options below, is option ___ or a combination of options ___ & ___.

? The sedimentation control devices will be installed and maintained as drawn in Option G below.

Does the site have a sinkhole, drainage inlet, drainage easement, or stream? ? Yes ? No If yes, indicate additional measures on appropriate Option selected below.

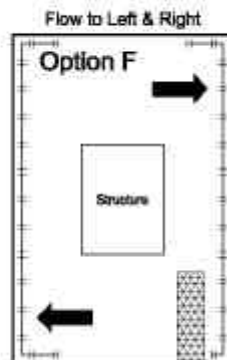
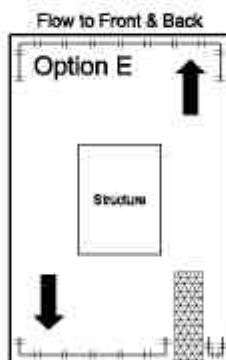
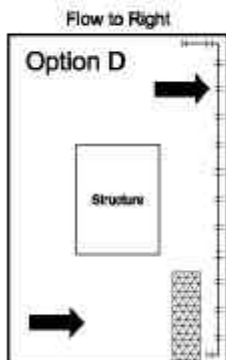
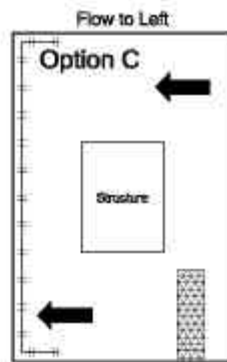
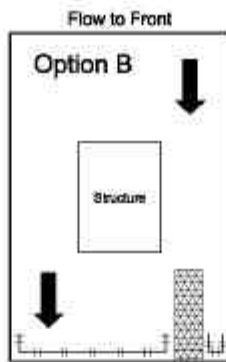
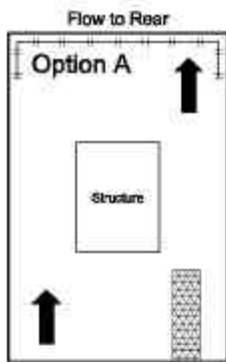
Will excavated materials be stockpiled or used as fill on site? ? Yes ? No If yes, show the location of the stockpiling or filling on the schematic below, with additional measures to protect adjacent properties or drainage features.

ANTICIPATED START DATE OF CONSTRUCTION: _____

EPSC Certified Contractor: _____ Certification No. _____

EPSC OPTIONS

INSTRUCTIONS: Identify one or any combination of letters for the EPSC schematic that best describes the measures that will be used on this property during construction.



Legend

- Silt fence or straw wattle
- Stabilized Construction Entrance
- Direction of flow (point downhill)

For Option G, show flow lines and proposed EPSC measures.

STANDARD CONDITIONS

The applicant will comply with the following conditions:

1. EPSC must be installed to prevent off-site sedimentation.
2. Perimeter controls shall be in place prior to beginning construction.
3. All EPSC measures shall be installed and maintained as specified in the City of Bowling Green's BMP Manual.
4. The contractor shall be responsible for keeping streets, drainage structures, streams and other properties free of sediment and other construction materials generated by this project.
5. Areas at final grade must be seeded and stabilized within 14 days. Disturbed areas not at final grade must be stabilized within 21 days.
6. Upon final stabilization (with at least 80% coverage), EPSC measures must be removed.

The undersigned hereby certifies that he/she will follow the Plot Plan EPSC Plan as described above and will protect all storm drainage structures on this lot. Furthermore, the undersigned will fully comply with the specifications in the City of Bowling Green's *BMP Manual* and Storm Water Management Ordinance. The undersigned will take all necessary actions to prevent off-site sedimentation from occurring. Once the building permit is issued, this document becomes an enforceable EPSC plan for the project site.

Applicant's Signature

Applicant's Printed Name

Date



City of Bowling Green, Kentucky
 Department of Finance
 Division of Occupational Licensing
 1017 College Street, Bowling Green, KY 42101
 Phone 270.393.3000 * Fax 270.393.3636
www.bgky.org

Permit # _____ Jobsite: _____

General Contractor/Construction Manager: _____

Contact Person: _____ Phone Number: _____ Fax: _____

Property Owner/Developer: _____

Note: Please remember, a subcontractor is any person or company hired to perform work that is not issued a W2 form. Only persons receiving an actual W2 are considered your employees.

PROPERTY OWNER DOING ALL THE WORK

_____ As the owner of the above site address, I will be doing all the work for the project listed on the above permit number. I understand that if I hire someone else to do any work, I will need to complete a subcontractor list prior to receiving final approval from the City Building Division and if I do not do so, it may hold up the final approvals and issuance of occupancy permits.

OR GENERAL CONTRACTOR DOING ALL THE WORK

_____ There will be no subcontractors on this job. I, or a W2 employee of my company will perform all the work at this site.

Signature _____ Date _____

****This form has been provided as a convenience to the general contractor to provide a list of sub contractors. If the general maintains a list that provides the information requested on this form, it can be submitted instead. Please provide as much contact information as available at this time. If only a partial list is available at the time of application, an updated list must be provided as it becomes available. ****

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____

Permit # _____ Jobsite: _____

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____

Subcontractor Business Name: _____ City License (if known) _____

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Sub Phone Number: _____ Sub Fax: _____

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____

Subcontractor Business Name: _____ City License (if known) _____

Sub Address _____

Sub Phone Number: _____ Sub Fax: _____
