

CITY OF BARDSTOWN
LAND DISTURBANCE PERMIT
(PLEASE FILL OUT BOTH SIDES BEFORE RETURNING)

PERMIT ID:

Owner _____ Contractor: _____
Lot Number: _____ Business Name: _____
Subdivision or Location Name: _____
Address of Site: _____ Zoning: _____

CHECK IF THERE AN EXISTING ENTRANCE AT THIS LOCATION?
IF NOT, DOES THE PROPOSED ENTRANCE:
CUT THROUGH A CONCRETE CURB: REQUIRE A PIPE?
CUT THROUGH A SIDEWALK: WHAT SIZE PIPE? _____
CROSS A ROADWAY DITCH:

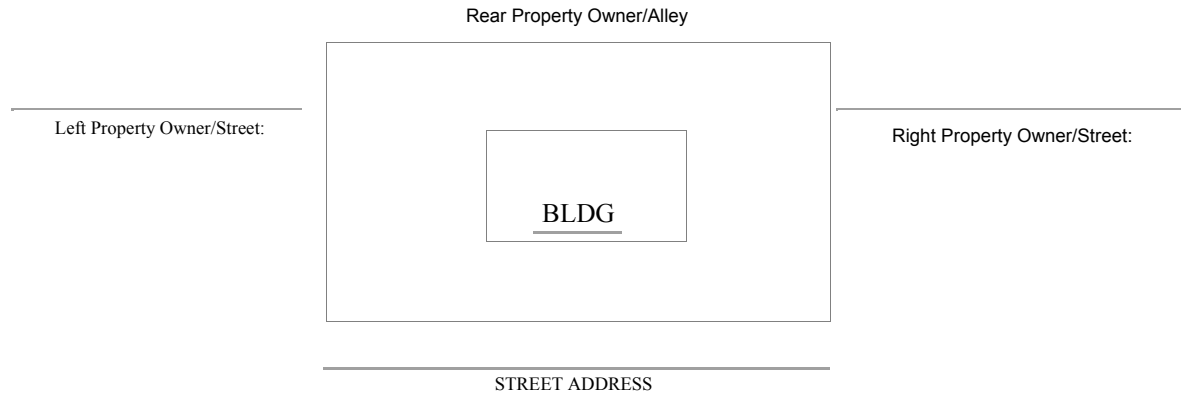
CHECK IF REQUIRED

ALL ENCROACHMENT PERMITS REQUIRE A REFUNDABLE \$500 BOND WITH APPLICATION
ALL PERMITS REQUIRE AN ADMINISTRATIVE FEE OF ONE OF THE FOLLOWING (non-refundable)
-DECKS, GARAGES, STORAGE BLDGS. ETC (LESS THAN 5000 SQ. FT.) \$10
-RESIDENTIAL/COMMERCIAL (UP TO 5000 SQ. FT) \$50
-RESIDENTIAL/COMMERCIAL (GREATER THAN 5000 SQ. FT) \$100
-TOTAL PUBLIC SIDEWALK FOOTAGE FOR STREET FRONTAGE OF LOT ft

NOTE: -CONSTRUCTION SHALL BE COMPLETED WITHIN ONE YEAR FROM ISSUANCE DATE.
- DITCH SHALL BE GRADED SUCH THAT WATER DOES NOT POND
- ALL DISTURBED R/W SHALL BE SEEDED AND STRAWED AND A GOOD STAND OF GRASS ESTABLISHED PRIOR TO RELEASE OF BOND.

ON DIAGRAM BELOW SHOW:
1. STREETS OR ROADS FRONTED BY ANY LOT SIDE
2. DISTANCE FROM LOT LINE AND LOCATION OF ENTRANCE
3. WIDTH OF LOT SIDES
4. WIDTH OF PROPOSED ENTRANCE
5. LOCATION AND WIDTH OF ANY EXISTING ENTRANCES

BOND 1000-00-241 _____ \$0.00
FEE 1022-00-5610: _____ \$0.00
SIDEWALK (\$10/ft) _____
CHECK NO: _____
TOTAL: _____ \$0.00
DATE RECEIVED: _____
RECEIVED BY: _____



IF SPACE IS NOT ADEQUATE FOR DRAINAGE PLANS, PLEASE ATTACH DRAWINGS.
SEE REVERSE SIDE: _____
FOR OFFICIAL USE ONLY:

SUBDIVISION/LOT DRAINAGE PLAN: NOT REQUIRED
 APPROVED
 DRAINAGE PLAN PENDING APPROVAL OR CONDITIONAL APPROVAL (SEE COMMENTS)

RIGHT OF WAY ENTRANCE APPROVAL, WHERE APPLICABLE:
 CURB CUT APPROVED
 ENTRANCE PIPE IN DITCH APPROVED
 ADDITIONAL INFORMATION REQUIRED
 PERMIT APPLICATION NOT APPROVED

Comments: _____
Approved By: _____ Approved Date: _____

CITY OF BARDSTOWN
220 NORTH FIFTH STREET
BARDSTOWN, KY 40004
(502) 348-5947

BUILDING SITE: _____

Owner _____
Address _____
City, ST, ZIP _____
Phone: _____

Contractor _____
Address _____
City, ST, ZIP _____
Phone: _____

Architect _____
Address _____
City, ST, ZIP _____
Phone : _____

Excavation _____
Address _____
City, ST, ZIP _____
Phone : _____

Masonry _____
Address _____
City, ST, ZIP _____
Phone : _____

Concrete _____
Address _____
City, ST, ZIP _____
Phone : _____

Termite _____
Address _____
City, ST, ZIP _____
Phone : _____

Roofing _____
Address _____
City, ST, ZIP _____
Phone : _____

Plumber _____
Address _____
City, ST, ZIP _____
Phone : _____

Electrician _____
Address _____
City, ST, ZIP _____
Phone : _____

DryWall _____
Address _____
City, ST, ZIP _____
Phone : _____

Insulation _____
Address _____
City, ST, ZIP _____
Phone : _____

Heat/Air _____
Address _____
City, ST, ZIP _____
Phone : _____

Exterior _____
Address _____
City, ST, ZIP _____
Phone : _____

Flooring _____
Address _____
City, ST, ZIP _____
Phone : _____

Paint _____
Address _____
City, ST, ZIP _____
Phone : _____

Cabinet _____
Address _____
City, ST, ZIP _____
Phone : _____

Landscape _____
Address _____
City, ST, ZIP _____
Phone : _____

Other 1 _____
Address _____
City, ST, ZIP _____
Phone : _____

Other 2 _____
Address _____
City, ST, ZIP _____
Phone : _____

Person Completing Form: _____ DATE: _____