

**SPENCER COUNTY
BUILDING CODE ENFORCEMENT**

Phone: 643-9039 Fax: 477-3242 220 Main Cross Street, Taylorsville KY 40071

Building Permit # _____

Application # _____

Application Date _____

BUILDING/CONSTRUCTION PERMIT & APPLICATION FOR INSPECTION

Applicant/Owner: _____ Phone # _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Proposed Building Subdivision: _____ Lot# _____

Property Address: _____ Lot Size/Acreage: _____ acres(s)

Any other structures on property? Yes () No () If yes, specify type: _____

Description of Proposed Building: _____

Crawl Space () Slab () Basement - () Sq. Ft. _____ Finished: Yes () No ()

Has the concrete been poured? () Yes () No If yes, when _____

Porch - Sq. Ft. _____ Deck - Sq. Ft. _____ Covered: Yes () No ()

Garage -Yes() No () Sq. Ft. _____ Basement Level Garage -Yes () No () Sq. Ft. _____

Number of Bedrooms _____ Number of Bathrooms _____ Construction Cost -\$ _____

Sq. Ft. of Floor Plan _____ Property Zone _____ Flood Plain: Yes () No () Map# _____

Setbacks: Front Yard _____ ft, Rear Yard _____ ft, Side Yards _____ ft & _____ ft

Water Supply: city or cistern Sewage Disposal Type: septic or sewer
(circle one) (circle one)

Electric Supplier/Company: _____

(INSPECTION FEE'S ARE IN ADDITION TO PERMIT FEE'S)

- A. **Residential Construction – New Construction Inspection’s** **\$160.00**
Includes Plan Review and Three (3) Inspections (Foundation, Framing, & Final)
- B. **Residential Addition – New Construction Inspection’s** **\$160.00**
Includes Plan Review and Three (3) Inspections (Foundation, Framing, & Final)
- C. **Modular Homes set with a crane** – Footer & Final \$100
- D. **Relocated Structure Inspection’s** – Footer & Final \$100
- E. **Garages Inspection’s** (over 120 sq.,ft.) – Footer & Framing \$60
- F. **Pole Barn -** Post Hole & Final \$60
- G. **Commercial Construction – New Construction Inspection’s** **\$ 0.08 per sq. ft.**
Includes Plan Review and Three (3) Inspections (Foundation, Framing, & Final)
- H. **Commercial Addition or Remodeling Inspection’s** **\$ 0.08 per sq. ft.**
Includes Plan Review and Three (3) Inspections (Foundation, Framing, & Final)
- I. **Mobile Home with a B-1 Seal certified by the Department of Housing or Manufactured Home**
- J. **Other:** _____ **\$50.00** per inspection

Individuals failing to pick up their permit within 15 days will be fined, there will also be a \$50. re-inspection fee applied to repeat offenders

I choose to construct this facility according to the requirements of the (check one):

- 2018 Kentucky Building Code (KBC)** **2018 Kentucky Residential Code (KRC)**

Disclaimer

(Read carefully and sign below)

I do hereby affirm and agree that I will observe all existing easements whether apparent or not and understand that it is my responsibility to determine the location and extent of any and all easements.

I do hereby affirm and agree that I will determine and comply with all applicable requirements and regulations of Spencer County Health Department, utility companies serving the subject property, applicable local jurisdiction, and Commonwealth of Kentucky (including but not limited to the Kentucky State Building Code, Kentucky Residential Code, and Kentucky Highway Department requirements). I do also hereby certify and state, pursuant to KRS 198.060 (10) that all contractors and subcontractors that are employed or will be employed on any activity covered by this permit shall be in compliance with the Commonwealth of Kentucky’s requirements for Worker’s Compensation Insurance (KRS Chapter 342) and unemployment insurance (KRS Chapter 341).

I do hereby affirm and agree that I will determine and comply with any and all private restrictions, covenants, regulations and with the Zoning Ordinance and Subdivision Regulations of Spencer County. I also certify that the setbacks shown on this building/zoning permit application are accurate to the best of my knowledge and that I have done my utmost to determine true and accurate property lines.

I hereby certify that I have read the above statements carefully and understand my obligations. I do hereby release the Taylorsville-Spencer County Joint Planning and Zoning Commission of any liability to my failure to meet the obligations stated above.

(check one: Owner Contractor)

Printed Name

Signature

**Permit must be posted within sight distance from the road or
Inspection’s will not be made.**

Plot Plan

A plot plan must be provided with sufficient detail, including but not limited to the following information: lot/tract dimensions, location and dimensions off ALL proposed and existing structures, driveways, easements and distances of ALL structures from front, side, and rear property lines.

() Please check if plot plan is attached.

For Office Use Only

1. ___ Permit Application completed and signed
2. ___ Two (2) sets of Construction Plans
3. ___ One (1) copy of a plot plan.
4. ___ Approved Septic System Permit or Letter from City if Sewer
5. ___ Proof of Workers Compensation Insurance -or- Affidavit of exemption
6. ___ Approved Entrance from County or State Road Foreman
7. ___ Proof of occupation/business license from County for all contractors.
8. ___ Subcontractors list

Obtaining the signature of the Administrative Official gives Zoning Approval for Construction, permits issued *without* such signature are in violation of the Zoning Regulations.

Zoning Administrative Review date: _____ By: _____

Fee Paid \$ _____ () Check # _____ () Cash
(This Fee is to be Paid to the order of: **Spencer County Planning & Zoning**)

Construction Plan Review date: _____ Building Permit # _____

Permit Issued By Inspector: _____

Fee Paid \$ _____ () Check # _____ () Cash () Exempt from inspections
(This Fees is to be paid to the order of: **Steve Clark, LLC**)

Comment: _____

You must call for your Inspections!

If you begin to move in or occupy a structure prior to obtaining a Final Inspection you will be fined \$250.

Subcontractors List for Building Permit

Today's Date _____ Project Start Date _____

Builder _____ Phone (____) _____

Mailing Address _____

Construction Location _____

Please list all sub-contractor with whom you do business:

Grading/Excavating _____
Name

_____ Address

Gravel/Rock _____
Name

_____ Address

Footers _____
Name

_____ Address

Basement Walls _____
Name

_____ Address

Concrete Flat Work _____
Name

_____ Address

Framing _____
Name

_____ Address

Window & Door Supplier _____
Name

_____ Address

ROOF:

Roofing Materials _____
Name

_____ Address

Roofer _____
Name

_____ Address

Lumber Supplier _____
Name

_____ Address

Brick/Stone Mason

Name

Address

Brick/Stone Supplier

Name

Address

Vinyl Installer

Name

Address

Vinyl Supplier

Name

Address

Gutter Installer

Name

Address

Gutter Supplier

Name

Address

ELECTRICAL:

Electrician

Name

Address

Electrical Fixtures

Name

Address

Electrician Fixture Supplier

Name

Address

Cable Installer

Name

Address

Audio System

Name

Address

Telephone System Installer

Name

Address

Alarm System Installer

Name

Address

DRYWALL:

Drywall Supplier

Name

Address

Drywall Installer

Name

Address

TRIM:

Trim Carpentry

Name

Address

Trim Supplier

Name

Address

Cabinet Manufacturer

Name

Address

Cabinet Installer

Name

Address

FLOORING:

Carpet Installer

Name

Address

Wood Installer

Name

Address

Tile Installer

Name

Address

PLUMBING:

Septic Installer

Name

Address

Plumber

Name

Address

OTHER:

HVAC

Name

Address

Insulation

Name

Address

Painters

Name

Address

Fireplace

Name

Address

Dumpster Supplier

Name

Address

Port-a-pot Supplier

Name

Address

Clean-up People

Name

Address

Insulation

Name

Address

Finish grade/sod, seed,
Landscaper, etc.

Name

Address

Other

Name

Address

Other

Name

Address

Other

Name

Address

Signature of Individual Submitting Information Date

Adopted 1/1/1997

AFFIDAVIT OF EXEMPTION FROM THE
KENTUCKY WORKERS' COMPENSATION ACT
(INDIVIDUAL)

Applicant, pursuant to KRS 342.610 (5), hereby declares exemption from the requirements to obtain workers' compensation insurance coverage as set forth in KRS 342.340. In support of this claim to exemption', Applicant states that the following facts are true and correct:

(please print)

Full Name of Applicant: _____

Business Address: _____

Phone NO. (____) _____

Nature of Business: _____

FEIN or SSN _____ Average No. of Employees _____

The foregoing is true and correct as I verify, believe, and swear. _____

Applicant/or authorized agent

State of Kentucky, County of Spencer

The foregoing Affidavit of Exemption was acknowledged and sworn to before me by

_____ of _____ (corporation/partnership) ON

behalf of the _____ (corporation/partnership) this _____ day of

_____, 20 ____.

_____ Notary Public Kentucky State at Large

My Commission Expires _____ 20 ____.

Instructions

The original Affidavit is to be immediately filed by the local building permit office with the Office of Worker's Claims, Prevention Park, 657 Chamberlin Ave., Frankfort, KY 40601 (1-800-731-5241).

A copy of this Affidavit is to be kept on file with the local office, which issues the building permits.

Notice to Affiant: Fraudulent execution of this form constitutes a criminal offense (KRS 523.030) under the laws of the Commonwealth.

SPENCER COUNTY BUILDING CODE ENFORCEMENT

Items needed to Pull a Residential Construction Permit

1. ___ Permit Application completed and signed
2. ___ Two (2) sets of Construction Plans (which you will pickup along with your permit once issued)
3. ___ Plot plan (with measurements from proposed structure to property line)
4. ___ Approved Septic Permit – or - Letter from City if Sewer – or – Private Plant Operator
5. ___ Proof of Workers Compensation -or- Affidavit of exemption
6. ___ Approved Entrance from County or State Road Foreman
7. ___ Proof of occupation/business license from County for all contractors.
8. ___ Subcontractors list – Names and address for each
9. ___ Fees: At the time a permit is issued. Separate checks or cash remitted for and as follows:
 - a. ___ Construction Permit fee payable to the Spencer County Planning & Zoning
 - b. ___ Inspection fee made payable to Steve Clark LLC

REQUIRED INSPECTIONS

The following inspections are required with no exceptions. Failure to obtain inspections will result in posting of a Stop Work Order and may require the removal of completed work so the inspection can be made as well as fines instituted for re-inspection.

It is your responsibility to arrange all inspections 24 hours prior to the requested inspection. The PERMIT should be posted at the job site not doing so could result in a cancellation of the requested inspection as well as fines instituted for re-inspection.

- FOOTER-Prescribed soil conditions, depth of footers, piers, grade beams, sub-footers, step-downs, when ready to pour and reinforcing steel is tied in place. **DO NOT** pour concrete without Inspectors approval- pouring concrete prior to posting permit will result in a \$250 fine.
- FRAMING-When structure is ready for drywall lathe, paneling, before insulation is installed. Electrical rough-in and HVAC system will be inspected at the same time as framing.
- FINAL INSPECTION-When the structure including finishes are completed and ready to occupy; when proper drainage is provided and the placement of sump pumps and downspouts have been made.

If proper inspections are not completed or dwelling is occupied prematurely, the entire structure must be certified in writing by a Kentucky Registered Professional Engineer or Architect.

IMPORTANT

- Permits must be picked up within **15 days** of issuance and posted or a fine will be incurred.
- Permits are to be posted within sight distance from the roadway or inspections will **not** be made. A re-inspection fee will apply at \$50.
- Anyone that pours concrete without a permit will be fined \$250.
- If the home is being moved into or already occupied prior to obtaining Final Inspection you will be fined and the possibility of being required to obtain a certificate from a Kentucky Registered Professional Engineer or Architect at your expense.

Above Fines made
Effective 9/1/2007

CONTACT INFORMATION

Building Inspector, Electrical Inspector cell 643-9039
Steve Clark PO Box 569, Taylorsville, KY 40071

Commercial Building Inspectorover 20,000 sq.ft. & Day Cares..... 502-573-0373
State Housing, Building & Construction, 101 Sea Hero Dr. Suite 100, Frankfort, KY 40601-5404

HVAC Inspector 502-655-5061
Kristopher Ahlers 101 Sea Hero Dr. Suite 100, Frankfort, KY 40601

Planning & ZoningOffice 477-3218, fax 477-3242
Julie Sweazy, Administrator 220 Main Cross Street
Jan Kehne, Enforcement

Business License & Tax Office(Mon. Wed. Friday).....office 477-2997
Stephannie Smith, Administrator 301 Main Cross Street

Health DepartmentSpears Drive..... office 477-2890
Justin Jump – Septic/Perk Testing (Monday - Friday 8:00- 10:00 am)
Kenny Thacker – Plumbing Inspector (Tuesday& Thursday 8:00-9:30 am).....office 502-220-2501

City of Taylorsville Waterworks office 477-3235
70 Taylorsville Road

State Highway Department office 477-2242
1430 Townhill Road

County Roadway Department
Todd BurchOffice 477-3223 or cell 817-2788
895 Fairgrounds Road