



Versailles-Midway-Woodford County Planning Commission
Woodford County Courthouse
103 South Main Street, Room 204
Versailles, KY 40383-1249

BUILDING PERMIT APPLICATION

Location: _____ Subdivision Name: _____ Lot #: _____
(Street Address Required) (If Applicable) (If Applicable)

Work Description: _____

Estimated Cost: _____ Square Footage: _____
(Total Project Cost Including Land/Lot, If Applicable) (Total Square Footage of Project Must Include Porches, Garages & Unfinished Areas)

Contractor Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Phone/Cell Number: _____

Owner Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Phone/Cell Number: _____

Check all Work Types included in Project.

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Suppression | <input type="checkbox"/> Fire/Damage Loss |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Range Hood | <input type="checkbox"/> Deck | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> Remodel | <input type="checkbox"/> Structure Moving | <input type="checkbox"/> Pool | <input type="checkbox"/> Manufactured Home |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Cellular Tower | <input type="checkbox"/> Solar Panel | <input type="checkbox"/> Other |

OFFICE USE ONLY

APPLICATION NUMBER: _____ REVIEWER: _____ ZONE: _____

UNIT OR LOT: _____ CENSUS CODE: _____ SITE: _____

PLAN REVIEW FEE: _____ (\$25 REQUIRED UPON APPLICATION SUBMISSION) BUILDING PERMIT FEE: _____

CHECK LIST FOR OBTAINING A BUILDING PERMIT

Versailles-Midway-Woodford County, Kentucky

ADDRESS OF PROPERTY: _____

- BUILDING PERMIT APPLICATION COMPLETED & SIGNED:** _____
 - OWNER
- BUILDING PLANS** (DRAWN TO SCALE)
- SITE PLAN** (DRAWN TO SCALE SHOWING ALL EASEMENTS AND SETBACKS)
- ENCROACHMENT (ACCESS) PERMIT FOR ENTRANCE** (CITY, COUNTY OR STATE)
- ELECTRICAL PERMIT** (If Applicable)
- WATER/SEWER CERTIFICATION LETTER** (If Applicable)
- SITE EVALUATION/HEALTHDEPT** (If Applicable)
- COPY OF DEED OR PLAT**
- FOR AREAS IN FLOOD PLAIN, STREAM CONSTRUCTION PERMIT** (If Applicable)
- FOR LOTS IN FLOODPLAIN OR WITH MINIMUM FLOOR ELEVATION, NOTE ON PERMIT**
- ENERGY CODE REPORT** (OPTIONAL)
- REGISTERED BUSINESS LICENSE WITH CITY AND/COUNTY** (If Applicable)
- BUILDING PERMIT AFFIDAVIT**
- CERTIFICATE OF WORKERS COMPENSATION INSURANCE**
- FEE PAID** (Payment to: Versailles-Midway-Woodford County Planning Commission)
- OTHER** _____

CONTACTS:

Building Inspector: Joshua Stevens – 859-230-4900

Planning Director: Steve Hunter – 859-873-8611

Electrical Inspector: James McClain – 859-338-8390

Woodford County Health Department (Septic): Barrett Schoeck – 859-873-4541

Woodford County Road Dept: Bo Wilson – 859-873-4231

KY Dept. of Transportation: 859-873-6796 (Local Office)

KY Dept. of Transportation: 859-246-2355 (Dist 3 Office, Lexington KY)

City of Midway: 859-846-4413 – (Water, Sewer, Streets)

City of Versailles: 859-873-5436

Mitzi Delius (Water/Sewer) ext. 128

Dan Knight (Streets/Stormwater) ext. 124

January 1, 2024

BUILDING PERMIT AFFIDAVIT

I the undersigned, understand and affirm that if at any time during the course of the Building Permit construction any public and/or private improvement constructed according to the approved construction plans for the subdivision location or other address named below, are disturbed or brought out of compliance with the approved plans and specifications, all such improvements, including sidewalks and all required grading and storm water diversion systems, shall be repaired and/or reconstructed according to the approved plans and specifications.

I further understand that no Certificate of Occupancy shall be issued until all such improvements are completed to the satisfaction of the Planning Commission.

THIS the _____ day of _____, 202_____

SUBDIVISION: _____

UNIT _____ BLOCK _____ LOT NO _____

PROPERTY ADDRESS: _____

APPLICANT'S NAME (Printed) _____

APPLICANT'S SIGNATURE _____