



**City of Jeffersontown  
PLANNING AND DESIGN REVIEW APPLICATION**

**For Staff Use Only**

**Docket No.:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Intake Staff:** \_\_\_\_\_ **Fee:\$** \_\_\_\_\_  
**TRC Date:** \_\_\_\_\_

**Please submit Application Forms in person to Planning and Design Customer Service**

Project Address \_\_\_\_\_ Zip \_\_\_\_\_

Project Name \_\_\_\_\_ Land Use \_\_\_\_\_

Existing Zoning District \_\_\_\_\_ Existing Form District \_\_\_\_\_ Existing Use District \_\_\_\_\_

Proposed Use \_\_\_\_\_

Tax Block: \_\_\_\_\_ Lot Number: \_\_\_\_\_ ; Deed Book: \_\_\_\_\_ Page No. \_\_\_\_\_

The subject property contains \_\_\_\_\_ sq. ft., if over 43,650 sq. ft. contains \_\_\_\_\_ acres

Fire Protection District \_\_\_\_\_

Council District \_\_\_\_\_ Council Member \_\_\_\_\_

If the property, or any portion thereof, has been the subject of a previous proposal, please list the docket number. Examples include but are not limited to: Variances, Landmark, Reviews, Appeals, Conditional Use Permits, Change in Zoning, Minor Plats, etc.

Docket Number \_\_\_\_\_ Case Manager \_\_\_\_\_

Docket Number \_\_\_\_\_ Case Manager \_\_\_\_\_

Docket Number \_\_\_\_\_ Case Manager \_\_\_\_\_

**Check one or more of the following:**

\_\_\_ Detailed District Development Plan                      \_\_\_ Amended Plan\*                      \_\_\_ LDC Waiver

\_\_\_ Category 2A Review                      \_\_\_ Amendment to Binding Element                      \_\_\_ Appeal

\_\_\_ Category 2B Review                      \_\_\_ Extension of Expiration Date

\_\_\_ Revised General District Development Plan\*                      \_\_\_ Sign Plan

\_\_\_ Revised Detailed District Development Plan\*                      \_\_\_ Signature Entrances

\_\_\_ Other, explain \_\_\_\_\_

\*A letter explaining the changes proposed must accompany these type of requests.



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**All types of case need to complete the questions regarding Environmental Constraints:**

1. Are there unstable soils on-site? \_\_\_ Yes \_\_\_ No
2. Are there slopes of 20% or greater on site? \_\_\_ Yes \_\_\_ No
3. Are there hydric soils or wetlands on-site in excel of 0.1 acres \_\_\_ Yes \_\_\_ No
4. Are there blue line streams on or adjacent to the property? \_\_\_ Yes \_\_\_ No
5. Are there lakes and/or impoundments in excess of 3 acres on site? \_\_\_ Yes \_\_\_ No
6. Is the development located in a local regulatory flood plain or conveyance zone? \_\_\_ Yes \_\_\_ No

**Note:** Preliminary determination of presence of the constraints listed above may be based on the Development Info Tool in LOJIC ([www.lojic.org](http://www.lojic.org)). Wetlands information is also available from the National Wetlands Inventory website: <http://wetlands2.nwi.fws.gov/sites/nwi/>.

**Note:** If you answered yes to questions 1 or 2, your development is subject to review under Chapter 4 Part 7; if you answered yes to questions 3, 4 or 5, your development is subject to Chapter 4 Part 8. If you answered yes to question 5, contact the Metropolitan Sewer District.

**Note:** Certain development activities are exempt from compliance with the environmental constraints regulations; refer to Section 4.6.1.B.

**Applicant:**

Print Name \_\_\_\_\_

Company or Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**Primary Contact Person:**

Print Name \_\_\_\_\_

Company or Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_



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**PLEASE NOTE: IF PROPERTY IS IN JOINT OWNERSHIP, ALL OWNERS OF RECORD MUST SIGN THE APPLICATION, FOR ADDITIONAL OWNERS, PLEASE USE AS MANY OF THESE FORMS AS NEEDED.**

**Owner(s) of Property:**

1. Print Name \_\_\_\_\_  
Company or Firm Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

2. Print Name \_\_\_\_\_  
Company or Firm Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

**Authorized Agent:**

**(Contact information for the authorized agent on Certification Statement)**

Print Name \_\_\_\_\_  
Company or Firm Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_



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**CERTIFICATION STATEMENT**

I hereby certify that \_\_\_\_\_ is the owner of the property located at \_\_\_\_\_ which is the subject of this application, and that I, \_\_\_\_\_, In my capacity as \_\_\_\_\_, am authorized to sign this application on behalf of the owner.

I understand that knowingly providing false information on this Application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010 et seq., knowingly making a material false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his duty is punishable as a Class B misdemeanor.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

**Note:** A certification Statement must be submitted with an application from requiring the owner's signature if the owner of the subject property is a corporation, limited liability company, partnership, association, trustee, etc., or if someone other than the owner signs the application.