



Zoning Permit Application
City of Frankfort

P.O. Box 697, Frankfort, KY 40602
 Phone: (502) 352-2094, Fax: (502)875-3579
 www.frankfort.ky.gov

Planning and Building Codes Department

Date: _____

Property Location: _____

TYPE OF IMPROVEMENTS

- Fence
- Accessory Storage Building (120 square feet or less)
- Retaining walls less than 4 feet high
- Driveway/sidewalk on private property
- Water tank (only directly on grade and if capacity does not exceed 5,000 gallons)
- Window awnings (must be supported by exterior wall)
- Swimming pools (above ground only)
- Windows
- Miscellaneous exterior changes within Historic District (no new construction)
- Temporary Tent

DESCRIPTION OF WORK

ESTIMATED COST

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APPLICANT

Name:
Address:
City/State/ZIP:
Phone:

PROPERTY OWNER

Name:
Address:
City/State/ZIP:
Phone:

CONTRACTOR

Name:
Phone:
License No.:

REQUIRED SUPPLEMENTAL INFORMATION

- Diagram of property, showing location and dimensions of the lot (property lines), all existing streets and on site structures, and the location of proposed buildings or improvements
- Label dimensions, existing, and proposed setbacks for front, side and rear yards
- \$10 fee, payable to City of Frankfort
- Projects within Historic District: Consult with staff for additional information required.

SITE PLAN

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Owner/applicant attests that they have read and agree that all improvement is limited to the drawn or attached plans, shall meet setbacks shown and the conditions of the approval as shown; any deviations shall require written approval from the City; and owner agrees to complete project within 90 days or permit will expire.

Applicant Signature _____ **Date** _____

NOTE: Final Inspection Required. Call (502) 352-2094 when project complete.

STAFF PERSONNEL ONLY

Zoning District: _____ Zoning Permit No: _____ Fee: _____

Approved [] Denied [] _____
Signature Date

Conditions

Final Inspection

Approved [] Denied [] _____
Signature Date

Notes:

PAID STAMP: