

Code Enforcement Division
1990 Barret Court, Suite B
Henderson, KY 42420
Phone (270) 831-1277
Fax (270) 831-1271

CITY OF HENDERSON PERMIT APPLICATION

Remodel

For Office Use

Permit Number _____
Date Issued _____
Permit Type _____
Jurisdiction: State ___ Local ___
Zone _____ Use _____

APPLICANT – Please complete entire application

APPLICATION DATE:

I. Building Location

Address _____
Section _____

Subdivision Name _____
Lot Number _____

PERMIT REQUIREMENTS

- ____ Drawing to scale of relevant wall sections & floor plans fully annotated as to scope of work including existing and proposed walls.
- ____ Window schedule for all replacement windows and existing window sizes.
- ____ List of all contractors/subcontractors including City of Henderson occupational license, workman's compensation, and unemployment information.

II. Contact Information

Building Owner:

Name _____
Address _____
City, State, Zip _____

Phone Number _____
Add. Phone Number (Cell) _____

General Contractor:

Name _____
Address _____
Henderson Occupational License Number _____

Phone #'s _____
City, State, Zip _____
Workman's Compensation _____ Affidavit _____

III. Permit Information

Residential

Commercial

Brief Description of Project _____

Est. Cost of Construction \$ _____

Estimated Electric Contract \$ _____
(Commercial / Industrial Only)

IV. Building Characteristics

Construction Type: ____ 5B (combustible)
____ 2C (noncombustible)

Foundation: ____ Basement
____ Crawl Space
____ Slab
____ Other _____

Dimensions: _____ Length
____ Width
____ Height
____ Total Sq. Footage

V. Subcontractors

Excavation _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Concrete _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Masonry _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Framing _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Drywalling _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Flooring _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Insulation _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Other _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Roofing _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Plumbing _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Electrical _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Heating & A/C _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Painting _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Landscaping _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Siding _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Other _____

Address _____

City, State, Zip _____

Phone #'s _____

Workman's Comp. _____ Affidavit _____

Attach a listing of all subcontractors who perform work at the site but do not appear on this form. The Code Enforcement Division **will not** issue a Certificate of Occupancy for new construction until this form has been submitted.

VI. Affirmation Statement

The owner of this building and undersigned do hereby covenant and agree to comply with all the applicable regulations pertaining to building, zoning and to construct the proposed building or structure to make the proposed change or alteration in accordance with the plans and specifications submitted herewith and certify that the information and statements given on this application, drawings and specifications are, to the best of my knowledge, true and correct.

Application by _____
Owner or Agent's Signature

Date _____