

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



Residential Commercial

Please complete entire application

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.

CONTRACTOR REQUIREMENTS

___ Henderson Occupational License Number _____ Workman's Comp _____ Affidavit _____

I. Building Location

Address _____ - OR- Subdivision Name _____
Section _____ Lot Number _____

II. Contact Information

Applicant _____
Name _____ Email _____
Address _____ Phone # _____

Building Owner _____
(If different than Name _____ Email _____
Applicant) Address _____ Phone # _____

General Contractor _____
Name _____ Email _____
Address _____ Phone # _____

III. Project Description

Est. Cost of Construction \$ _____

IV. Building Characteristics

Dimensions: Height _____
Length _____
Width _____
Total Square Footage _____

For Office Use

Zone: _____ PID#: _____ Flood Plain: __ Yes __ No
Permit Type: _____ Variance/CUP: __ Yes __ No
Jurisdiction: State _____ Local _____ Permit Rev Fee: \$ _____
Permit #: _____ Permit Fee: \$ _____

PROJECT ADDRESS:

V. Subcontractors

Excavation _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Roofing _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Concrete _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Plumbing _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Masonry _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Electrical _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Framing _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Heating & A/C _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Drywalling _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Painting _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Flooring _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Landscaping _____
Address _____
City, State, Zip _____
Phone #'s _____
Workman's Comp. _____ Affidavit _____

Insulation _____
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 _____

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, and that the proposed change or alteration will not alter the existing drainage patterns.

Application by _____
Owner or Agent's Signature

Date _____