

PLAN APPLICATION FORM

CITY OF BEREA
CODES ENFORCEMENT OFFICE
212 CHESTNUT STREET
BEREA, KY 40403
PHONE 859.986.8528 FAX 859.986.7657

Complete all applicable spaces.

Today's Date: _____

Name of person submitting plans _____ Company _____	
Mailing Address _____	City _____ State _____ Zip _____
Phone _____	Email _____
Is the Plan Review Fee included with the plans? yes [] no	
Business & Project Name _____	
Project Address _____	City _____ State _____ Zip _____
Owner (Individual) _____ (Company) _____	
Mailing Address _____	City _____ State _____ Zip _____
Phone _____	Email _____
Architect (Name & Firm) _____ Phone _____	
Mailing Address _____	City _____ State _____ Zip _____
Phone _____	Email _____
As the architect listed above, I am responsible for construction contract administration yes [] no []	
NOTE: DESIGN CERTIFICATION REQUIRED. All buildings or structures requiring professional design (Architect or Engineer) by Section 122 of the 2018 KBC shall include a statement from the design professional in responsible charge indicating the Seismic Design Category for this specific site and the applicability of seismic bracing requirement for architectural, mechanical and electrical components and a statement to that effect shall be included with the initial construction documents submitted to the building code official.	
Engineer (Name & Firm) _____ Phone _____	
Mailing Address _____	City _____ State _____ Zip _____
Phone _____	Email _____

Project Contractor _____ Phone _____
Mailing Address _____ City _____ State _____ Zip _____
Phone _____ Email _____

BUILDING INFORMATION

Number of buildings in this submittal _____
Use of building(s) i.e. restaurant, office, storage, or other (please specify) _____
Building(s) in this project is/are new freestanding addition to existing building
 renovation renovation & addition
Total area in new building or addition _____SF
Number of levels (including basement) _____ Basement yes no
Total area of existing building _____SF Date construction to begin _____
Estimated completion date _____

TYPE OF PLAN SUBMITTALS (check type requested at this time)

Building Plan Submittals Full Building Review Expedited Site & Foundation
Shop Drawing Plan Submittals (Submit one set of plans for the following)
Suppression System (Sprinkler, CO2) Range Hood System Fuel Tank
Alarm System Bleacher Seating Swimming Pool Prefabricated Truss

Plan Submittal Notes:
Number of plan sets to be submitted: A plan set consists of 1 plan and 1 plan application form
KRS Chapters 322 & 323 should be consulted to determine the requirements for a Registered Design Professional such as an Architect and/or Engineer

Flood Plain

Is this property in the flood plain yes no
If yes, please attach a copy of the approval from the State Division of Water

PLEASE ATTACH A COMPLETED PLAN REVIEW FEE WORKSHEET