



Grading or Supporting Plan Review Application
When Submitted Separate from Site Development Plan
(Lighting, Traffic, Landscaping, Geotechnical, etc.)

**Campbell County & Municipal
Planning & Zoning Commission**
1098 Monmouth Street, Suite 343
Newport, Kentucky 41071

Phone: (859) 292-3880
Fax: (859) 547-1868

www.campbellcountyky.org

1. Project Located In:

If your city is not listed below, please speak with a representative of Planning & Zoning to determine the correct jurisdiction of your site.

- | | | | |
|---|---------------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Unincorporated Campbell County | or in the City of: | | |
| <input type="checkbox"/> California | <input type="checkbox"/> Cold Spring | <input type="checkbox"/> Crestview | <input type="checkbox"/> Dayton |
| <input type="checkbox"/> Melbourne | <input type="checkbox"/> Silver Grove | <input type="checkbox"/> Southgate | <input type="checkbox"/> Woodlawn |

2. Project Address: _____

3. Project/Subdivision Name: _____

4. Section/Phase Number: _____

5. PIDN: **999-99**-____ - ____ . ____ Zone: _____

6. **Property Owner's Name:** _____

Address: _____

	City	State	Zip
Phone Number:	_____	Email:	_____

7. **Applicant's Name:** _____

Address: _____

	City	State	Zip
Phone Number:	_____	Email:	_____

8. Acreage Under Review: _____ Acres Number of Lots/ Units: _____

9. Is the site subject to a:

- | | | | |
|-------------------------|------------------------------|-----------------------------|---------------------------------|
| Variance: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, date of approval? _____ |
| Conditional Use Permit: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, date of approval? _____ |
| Zone Change: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | If yes, date of approval? _____ |

10. **SIGNATURE:** I hereby certify that I am requesting this permit on behalf of all owners of the property and that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit. I understand and acknowledge that all fees are nonrefundable.

Applicant's Signature

Date

Property Owner's Signature

Date

The following items may be required to be attached to your application:

- Grading Plans:** Attach **three (3) original** copies of the Grading Plan **stamped and signed by a Kentucky Licensed Professional Engineer**. Plan shall include **one (1)** copy of the storm water calculations and Erosion Control Plan.
- Landscape or Lighting Plans:** Attach **three (3)** copies of plan
- Traffic Study:** Attach **three (3)** copies of a study prepared by a **Kentucky Licensed Professional Engineer**
- Geotechnical Report:** Attach **three (3)** copies of the report **signed by a Kentucky Licensed Professional Engineer**.
- Other Plans:** Attach **three (3)** copies of plan
- Fee(s):** All fees are per current Fee Schedule. All fees are non-refundable.

INFORMATION BELOW TO BE COMPLETED BY STAFF

FEE	DESCRIPTION	CODE
\$	Plan Review Fee	<i>See Fee Schedule</i>
\$	Other Fee	<i>CREDITCARD</i>
\$	TOTAL AMOUNT DUE	

DATE RECD: _____

Cash

Check #: _____

Check Name: _____