

City of Elkton

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Building Permit Application

Property Owner's Name: _____

Property Physical Address: _____ Zoning Code: _____

Property Owner's Mailing Address: _____

Property Owner's Phone Number: _____

Applicant Name (if not owner): _____

Applicant Mailing Address: _____

Applicant Phone Number: _____

Type of Improvement (check one):

() New Construction () Addition () Accessory Structure () Fence () Other: _____

Describe Purpose and Future Use of Construction: _____

Building Type: () Residential () Business () Industrial () Other: _____

Area of Building or Accessory Structure: _____

Distance of Property Line to the Following:

Front of Building: _____ feet Rear of Building: _____ feet

Right Side of Building: _____ feet Left Side of Building: _____ feet

Total Lot Width: _____ feet Total Lot Depth: _____ feet

List all contractors working on this project. (All contractors must have a current Business License):

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Attach additional names if necessary.

