



Louisville Metro Planning & Design Services

Standard Application

For staff use only: Case # _____ Date: _____ Intake Staff: _____ Amount \$: _____

Project Information

Type of Application(s) (e.g., Waiver, Variance, Conditional Use Permit, etc.): Detailed District Development Plan

Section of the Code Book that applies (if applicable): _____

Project description (e.g., retail center and office development, waiver for design standards, etc.): _____

Development of an out parcel at Tyler Pointe to build a local bank branch

Primary Project Address: 12523 Taylorsville Road

Additional Address(es): _____

Primary Parcel ID(s): 00470343

Additional Parcel ID(s): _____

Estimated Project Cost: \$ 1 mil

Projected Infrastructure Improvement Cost: \$ 30k

If the property, or any portion thereof, has been the subject of a previous proposal in this office, please list the docket/case number(s). Examples include, but are not limited to, Variances, Appeals, Conditional Use Permits, Minor Plats, etc. See list of resources attached to this application to obtain the below information.

Docket/Case #: 11332 Docket/Case #: _____

Docket/Case #: _____ Docket/Case #: _____

Proposed Use: Local Bank Branch Existing Zoning District: ppD

Existing Use: Vacant Existing Form District: N

Council District: 20 Fire Protection District: Jeffersontown

Deed Book(s)/ Page Numbers: 9234x0666 PB 53PG 88

The subject Property contains +/-0.65ac sf / acres Number of Adjoining Property Owners (APO's): 0

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Standard Application

Contact Information

Owner(s) Information & Signature(s): Required for all applications (except Landscape Plans, and Minor Plats). The application will not be accepted without it. Please add additional sheets as needed.

Any additional required reviews, or approvals, must be obtained by the owner, or owner's representative, prior to the issuance of any building permit. It is the responsibility of the owner, or owner's representative, to verify that all Metro Land Development Code requirements are being followed.

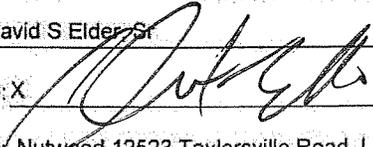
Please attach any additional owners, or contact information, to this application. The Certification Statement must be completed, if someone other than the owner(s) will be representing this case at Planning & Design Services (i.e., Surveyor, Engineer, Planner, Attorney, signing authority for a company, etc.)

Primary Owner: check if primary contact

Secondary Owner: check if primary contact

Name: David S Elder Sr

Name: _____

Signature: X 

Signature: _____

Company: Nutwood 12523 Taylorsville Road, LLC

Company: _____

Address: 10197 Bunsen Way

Address: _____

City: Louisville State: KY Zip: 40299

City: _____ State: _____ Zip: _____

Primary Phone: 502-491-8005

Primary Phone: _____

Alternate Phone: _____

Alternate Phone: _____

Email: * _____

Email: * _____

Applicant: check if primary contact

Professional: check if primary contact

Name: _____

Name: Chad Whitaker

Signature: _____

Signature: 

Company: _____

Company: Alpha Omega Innovations, LLC

Address: _____

Address: 2425 Little Union Road

City: _____ State: _____ Zip: _____

City: Taylorsville State: KY Zip: 40071

Primary Phone: _____

Primary Phone: 502-299-6678

Alternate Phone: _____

Alternate Phone: _____

Email: * _____

Email: * chadw@aoibydesign.com

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Louisville Metro Planning & Design Services

Standard Application

Certification Statement

A Certification Statement must be submitted with any application in which the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc., or if someone other than the owner(s) of record sign(s) the application.

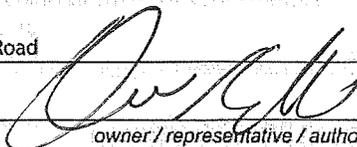
I, David S. Elder, Sr. in my capacity as

Owner Representative Authorized Agent Other: _____

hereby certify that Nutwood 12523 Taylorsville Road, LLC is (are) the

(owner / LLC / corporation / partnership / association / trustee / etc.)

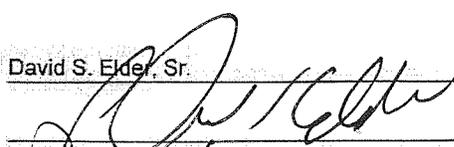
owner(s) of the property located at 12523 Taylorsville Road

which is the subject of this application, and that I, 

owner / representative / authorized agent / other

am authorized to sign this application on behalf of the owner(s).

Print Name: David S. Elder, Sr.

Signature: 

Title: Partner

Address: 10197 Bunsen Way

City: Louisville State: KY Zip: 40299

Primary Phone: 502-491-8005

Alternate Phone: _____

Email: * dse@elderconstruction.com

I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010 et seq. knowingly making a material false statement, or otherwise providing false information, with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class B misdemeanor.

Louisville Metro Planning & Design Services | 441 South 5th Street, Suite 300 | Louisville, KY 40202
Phone: (502)574-6230 | Fax: (502)574-8139 | www.louisvilleky.gov/planningdesign

Page 3 of 4
Revised 6/03/2011

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Louisville Metro Planning & Design Services Standard Application

Resource List

1. Planning & Design Services homepage: <http://www.louisvilleky.gov/PlanningDesign/>

2. Property Valuation Administration (PVA):

Fiscal Court Building
531 Court Place, Suite 504
Louisville, KY 40202-3393
(502) 574-6380

Instructions for obtaining property owner information for mailing labels:

- Go to <http://jeffersonpva.ky.gov/>
- Use the property search tool at the top right hand corner of the page to find property owner names
- Look up property owners' addresses using phone book

Or

- Visit the PVA office in the Fiscal Court Building at 531 Court Place, Suite 504 to obtain full owner and owner address information

3. Louisville & Jefferson County Information Consortium (LOJIC):

Metropolitan Sewer District (MSD)
700 West Liberty Street
Louisville, KY 40203-1911
<http://www.lojic.org/>

Instructions for obtaining a Development Information Sheet:

- Go to <http://www.lojic.org/>
- Place the cursor over "**Interactive Map**" in the menu at the left
- Wait for the pop-up menu to appear and click on "**Standard Information**"
- Search for the property by address, parcel, or intersection
- On the toolbar at the left, click the green circle with an "i" in it
- Click on the property and wait for the Development Information Sheet to appear at the right
- Click "**Export to PDF**" and then print

4. Jefferson County Clerk's Office

2nd Floor of Metro Hall
527 West Jefferson Street
Louisville, KY 40202
(502) 574-6220
<http://www.jeffersoncountyclerk.org/>

Many deeds, plats and other records are available online at:

<http://www.landrecords.jcc.ky.gov/records/50Search.html>

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MSD SUBMITTAL FORMS: (MSD Page 1 of 3)

MSD PLAN SUBMITTAL APPLICATION

MSD USE ONLY:	SD PERMIT # _____	WM # _____	SUB # _____	RECORD # _____
	AREA TEAM _____	LOJIC _____	SERVICE AREA _____	

NOTE: Complete Sections 1 & 2 for all preliminary submittals. Complete Sections 1, 2, & 4 for all construction submittals. Use this form for all submittals to the Development Department. This submittal will be reviewed within 14 days of receipt.

SECTION 1: PROJECT INFORMATION - TO BE COMPLETED BY THE APPLICANT

Project Name: Tyler Pointe - Lot 2 BANK OUTLOT

Project Address: 12523 Taylorsville Road

Parcel Id: 00470343 & 00470342 Deed Book/Page: 9234x666 PB 53 pg 88

Submittal Type: Sanitary Sewer Name of Treatment Plant: N/A Owner of Treatment Plant:

Subdivision Site Plan Single Family Record Plat Minor Plat Easement Plat

Plan/plat previously submitted? Yes If yes, Project Name: Tyler Pointe

WM # 5812 Sub # _____ LE # _____

Approval Type Requested: ESPC Planning/Zoning Construction Foundation Only Composite

Grading/Drainage/Tree Preservation Completed Copy of Appropriate Checklist Attached: Yes

SECTION 2: CONTACT INFORMATION - CHECK THE APPROPRIATE BOX TO INDICATE WHO IS TO BE DESIGNATED AS THE PERMITTEE RESPONSIBLE FOR THE LAND DISTURBING ACTIVITY.

Owner: Nutwood 12523 Taylorville Rd, LLC Contact Person: David Elder

Address: 10197 Bunsen Way City: Louisville State: KY Zip Code: 40299

Phone: 502-491-8005 Fax: _____ E-mail: dse@elderconstruction.com

Developer: Elder Construction Contact Person: David Elder

Address: 10197 Bunsen Way City: Louisville State: KY Zip Code: ~

Phone: 502-491-8005 Fax: _____ E-mail: dse@elderconstruction.com

Design Firm: Alpha Omega Innovations, LLC Contact Person: Chad Whitaker

Address: 2425 Little Union Road City: Taylorsville State: KY Zip Code: 40071

Phone: 502-299-6678 Fax: 877-741-6213 E-mail: chadw@aolbydesign.com

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MSD SUBMITTAL FORMS: (MSD Page 2 of 3)

SECTION 3: TO BE COMPLETED BY MSD CUSTOMER SERVICE

Sewer Connection (Check all that apply)

Sanitary Must Apply New Existing Additional Not Applicable Private Board of Health

Storm Must Apply New Existing Additional Not Applicable Private Board of Health

Capacity Charge Worksheet Completed: Yes Capacity Charges Due \$ _____

Connection Fees Due \$ _____ Pending File Started: Yes Comments: _____

Completed By _____ Date: _____

SECTION 4: REQUIRED SIGNATURES FOR THE SITE DISTURBANCE PERMIT

I/We acknowledge receipt of the terms and conditions of MSD's review and approval submitted with this application. I/We further certify that the information on this form is true and correct and that all required items needed for MSD review have been submitted. The omission of required items shall be cause for rejection of the submittal without review. I/We certify that all land disturbing and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans. I/We certify that a person familiar with plans and holding a certificate of EPSC training shall be onsite during the land disturbing activity. If applicable, the certified construction reviewer shall have full authority to inspect the site and require necessary measures to maintain compliance. I/we hereby grant MSD the right of access to the site at all times for the purpose of onsite inspections during the course of construction and to perform maintenance inspections following the completion of the land disturbing activity.

 OWNER (CORPORATION, PARTNERSHIP, LLC) OWNER (SIGNATURE) DATE
 (PRINT)

 DEVELOPER (CORPORATION, PARTNERSHIP, LLC) DEVELOPER (SIGNATURE) DATE
 (PRINT)

NOTE: If the applicant is signing for a Corporation, Partnership or LLC, appropriate documentation authorizing the signature

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MSD SUBMITTAL FORMS: (MSD Page 3 of 3)

PRELIMINARY PLAN CHECKLIST
(Items Required for Review)

Project Name: Tyler Pointe - Phase 1 Date: 4/7/2011

The purpose of this checklist is to expedite and facilitate the review process. This checklist gives the minimum requirements needed for MSD review. All items shall be checked as included or marked N/A. The omission of required items may be cause for rejection of the submittal without review.

REQUIRED ITEMS

- MSD Plan Submittal Application
- Project Address
- SUB/WM number
- Location Map
- Plan Date
- Landscape Buffer Areas
- Owner(s) Name & Address
- Revision Block
- Adjacent Property Owners
- Developer(s) Name & Address
- Existing Easements
- Property Boundary
- Engineer(s) Name & Address
- Proposed Easements
- Request for Sanitary Sewer Capacity
- EPSC checklist (if sensitive features exists)
- Existing Utilities, Sewers & Storm Drainage
- Topography of Site + Minimum 50' Surroundings
- Soil Type At Final Grade for the Site
- Concept Drainage (Directional Flow Arrows, or Proposed Ditches/Pipes, to Existing Outlet)
- Detention Basin Location with approximate Size Calculations (x=CRA/12). Identify approximate surface area and depth of basin.
- 100 Year Local Regulatory Floodplain Limits (or FEMA if Local Regulatory Floodplain is Unknown)
- Concept Sanitary Sewers including identification of Waste Treatment Plant

ADDITIONAL INFORMATION/NOTES (IF APPLICABLE)

- Subject to MSD Plan Review Fee (for projects in Anchorage, Jefferson town, Prospect, Shively, & St. Matthews, & portions of unincorporated Jefferson County)
- Subject to MSD Regional Facilities Fee (if detention not required)
- KDOT Approval Required (if State Highway is affected by development)
- Detention Notes
- Sewers by LE Subject to Fees
- Sewers by Connection Subject to Fees
- COE Wetlands Determination Required
- Sinkhole Geotechnical Analysis Required
- Special Notes which may Pertain to Project

*The Engineer that has Stamped & Submitted the plans must sign the checklist

Signature: *Chad Whitaker*
Print Name: Chad Whitaker

Date: 8/23/2011

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Design/Revision Detail & General District Development

Plan Checking & Forms

Title No. _____ Date _____ Hours Worked _____ Total \$ _____

CHECKLIST

Requirements for all Submittals:

- 1. Completed Planning & Design Standard Application Form. All blanks must be filled in. The Owner's information & signature are required. **If the property address is unknown, please call the Addressing Team Staff at 502-574-3490.**
- 2. Development Information (DI) sheet **(obtained from LOJIC)*
- 3. Completed Certification Statement *(page 4 of the application)*
- 4. A letter of explanation for the proposed development
- 5. A copy of the current Recorded Deed **(Some deeds may be obtained at Jefferson County Clerk)*
- 6. One (1) set of mailing labels sheet (APO's) containing name and mailing address of the 1st tier adjoining property owners and individuals who provided testimony (oral or written) in support or opposition concerning a change in zoning. **(Property owner information may be obtained from Property Valuation Administrator)*
- 7. One (1) photo copy of mailing labels, APO's

**See Resource List*

Site Plan Requirements:

- 8. One (1) 8 1/2" x 11" reduced copy of the development plan
- 9. Eight (8) 24" x 36" copies of the Development Plan
- 10. One (1) elevation drawing of proposed new structure(s)

Required Site Plan Information	
Plan drawn to engineering scale	Property lines with responsible party lots shall show bearings
North arrow shown	Contour lines shown on plan (required for raw construction only)
Neighborhood shown	Existing and/or proposed structures shown & identified
Site address	Adjacent building setbacks with dimensions
Tax Block & Lot number	Internal roadways and utility easements
Zoning of property	Setbacks in right-of-way dimensions
Zoning of adjacent properties	Location, ownership, Deed Book & Page of adjacent property owner
Existing Use	Net & Gross acreage of site
Proposed Use	Intensifier, private net & gross density, & number of dwelling units
Street names shown	Dimensions of drive lanes & point of business & egress
Right of way width shown	Off street parking including ADA parking spaces shown
Parking calculations	Typical dimensions of parking spaces & aisles
Gross building footprint area	Off street loading areas
Gross floor area of buildings	Accessory structures shown with required setbacks
Existing tree inventory	ILAVIA calculations of tree canopy plan not required
Height of structures	Landscaping Buffer areas in accordance w/ chapter 10 of the LDC
Free-standing signs/structures	Comm District & Plan District Boundaries if nearby
Free-standing signs/structures	Future District transition zone shown if required by regulation
Plan date	Reason for plan

Louisville Metro Planning & Design Services | 400 South Fourth Street | Louisville, KY 40203
 Phone: 502-574-3490 | Fax: 502-574-3491 | Email: metroplanning@jeffersoncountyky.gov

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 Page 1 of 1

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Additional Forms: (#11-13 forms are included in this checklist)

- 11. Completed Metropolitan Sewer District (MSD) "Plan Submittal" Application form (REQUIRED).
- 12. Completed Metropolitan Sewer District (MSD) "Preliminary Plan checklist" (REQUIRED).

Fee Schedule:

- 13. FEES: Cash, charge or check made payable to Louisville Metro Finance. All checks must have an address and phone number.

Revised/Detailed Plans:

Application Fee:	\$ 270.00
Clerk's Fee for Land Use Restriction:	\$ 25.50
Sub-TOTAL	\$ 295.50
APO Notice Fee @ \$ 1.00 per notice =	+ _____
TOTAL	\$ 295.50

Note: If two or more applications requiring a land use restriction form are submitted simultaneously for the same site, only one \$25.50 Clerk's fee is required in addition to the application fees.

Staff Use Only:

- 14. Enter into Hansen to obtain a case number
- 15. Fill in the Case #, Date, Staff (initials) in the box at the top of the application form.
- 16. Stamp the date received on every page with case # written in RED in the lower right hand corner of every page submitted. This includes all sheets on all plans submitted.
- 17. Paperclip the plans and maps together and place on table for pick-up

RESOURCE LIST:

- | | |
|--|---|
| <p>1. Planning & Design, PDS, (502) 574-6230
 http://www.louisvilleky.gov/PlanningDesign/
 444 S 5th St
 Louisville, KY 40202</p> <p>2. Louisville & Jefferson County Information Consortium or LOJIC
 http://www.lojic.org/
 700 W Liberty St
 Louisville, KY 40203-1911
 a. click on interactive map
 b. click on standard information map</p> | <p>3. Property Valuation Administration, PVA, (502) 574-6380
 http://www.pvalouky.org/index.php
 Fiscal Court Building
 531 Court Place, Suite 504
 Louisville, KY 40202-3393
 <i>This is where you will obtain mailing label/owner information.</i></p> <p>4. Jefferson County Clerk, (502) 574-6220
 http://www.jeffersoncountyclerk.org/
 2nd Floor of Metro Hall
 527 W Jefferson St
 Louisville, KY 40202</p> |
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