



**FRANKLIN COUNTY
PLANNING & BUILDING CODES
DEPARTMENT**
321 W. Main Street
Frankfort, Kentucky 40601
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OFFICE USE ONLY

Received: ____________

Payment Amt: \$_____

Receipt #: _____

Meeting: _____

APPLICATION FOR STREET NAME CHANGE

A. GENERAL INFORMATION

1. _Applicant: _____

2. _Mailing Address: _____

3. _Phone #: _____ Fax: _____

4. _E-mail Address: _____

5. _Current Street Name: _____

6. _Proposed New Street Name: _____

7. _General Location of Subject Street: _____

9.02.00 STREET NAME CHANGES

STREET NAME CHANGE INFORMATION

1. A brief explanation of how the requested name change is necessary or helpful in improving the general health, safety and, welfare of the general public, as well as a brief explanation of any health, safety, and welfare issues present because of the existing street name.

C. SUPPLEMENTAL ITEMS

The following items must be attached to the application as supporting information to this request:

1. Ten (10) copies of a scaled drawing showing the THOROUGHFARE or STREET involved, with names and addresses of all adjacent property owners along the RIGHT-OF-WAY as reflected by information and maps maintained by the Property Valuation Administrator. Vacant lots shall be designated on the scaled drawing.
2. Petition including all property owners along the RIGHT-OF-WAY as reflected by information and maps maintained by the Property Valuation Administrator with signatures of approval by a minimum of 51% of property owners per the Franklin County Subdivision Regulations Section 9.02.01 (A).

Signature of Property Owner(s)

Date: