



**FRANKLIN COUNTY**  
**PLANNING & BUILDING CODES DEPARTMENT**  
 321 West Main Street  
 Frankfort, KY 40601  
 Phone: (502) 875-8701  
 Fax: (502) 875-8737  
 www.franklincounty.ky.gov

**PROPERTY ASSESSMENT / REASSESSMENT  
 MORATORIUM CERTIFICATE APPLICATION**

Date:

**1. Applicant Information:**

- Applicant/Agent name: \_\_\_\_\_
- Mailing address: \_\_\_\_\_
- Phone #: \_\_\_\_\_ Email: \_\_\_\_\_
- Owner of Property: \_\_\_\_\_ Address: \_\_\_\_\_
- Architect \_\_\_\_\_ Phone # \_\_\_\_\_

**2. Property Information:**

- Property Address: \_\_\_\_\_
- Zoning District: \_\_\_\_\_
- Type of Existing Use of the Property: \_\_\_\_\_
- Type of Proposed Use of the Property: \_\_\_\_\_
- Gross Floor Area of the Structure(s): \_\_\_\_\_
- Is the Structure more than 25 years old?  yes  no (attach documentation)
- Previous two (2) years assessed value: \_\_\_\_\_ & \_\_\_\_\_
- Describe the proposed time schedule of the project (beginning to completion):

- Detailed description of the nature and extent of the restoration, repair, rehabilitation, or stabilization to be undertaken:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- Have all applicable local building approvals been received    yes                       no
- Local Building Permit Number \_\_\_\_\_
- If project is located within the regulatory floodplain has a stream construction permit been issued by the Division of Water    yes  no
- Stream Construction Permit Number \_\_\_\_\_

**3. THE FOLLOWING ITEMS ARE REQUIRED AS PART OF THIS APPLICATION:**

- Completed Application - The applicant must fill out all applicable areas of this application. The application must be submitted to the Planning and Building Codes Department.

- Proof of Ownership - A copy of the last recorded deed of the property. An agent affidavit is required if the applicant is other than the owner.
- Agent Affidavit (if applicable) - If the applicant is other than the owner of the property.
- Architectural/building Plans detailing the planned work to be done, with an estimate of the total project expenditure. NOTE: Documentation of all expenses incurred must be provided to the Franklin County Planning Department upon project completion.
- Non-residential Uses: A detailed list of all fixed building equipment which will be a part of the facility and a statement of the economic advantages expected from the moratorium, including expected construction employment.

**NOTES:**

Before the moratorium certificate can be issued, all submitted improvements shall be inspected (following the submittal and approval of a building permit) upon completion to certify that it has met all applicable design requirements. **It is the applicant's responsibility to call for a final inspection.**

**I HAVE READ THE INFORMATION IN THIS APPLICATION AND HAVE FILLED IN ALL ANSWERS CORRECTLY TO THE BEST OF MY ABILITY.**

APPLICANT'S PRINTED NAME:

DATE:

**AFFIDAVIT OF OWNERSHIP AND ACCURACY**

I/we, \_\_\_\_\_ do hereby swear or affirm under penalty of perjury, that I/we am/are the owner(s) of the property for which this assessment moratorium is sought and that all information contained in this application is true and correct. I further understand that it is my responsibility to submit all of the above information in order for my application to be processed.

\_\_\_\_\_  
owner signature

\_\_\_\_\_  
date

\_\_\_\_\_  
owner signature

\_\_\_\_\_  
date

<b>FOR OFFICIAL USE ONLY</b>	
Application # _____	
Comments: _____	
Application received by _____ date and time:	
Application Meets Requirements/Approved: <input type="checkbox"/> yes <input type="checkbox"/> no	
Date Application Approved: _____	
Date application sent to Sheriff : _____	
Date application sent to PVA: _____	
Initial PVA Assessment Value: _____	