

12. _____
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13. Have you had a pre-application meeting with the BCPC staff: Yes No

14. Have you submitted a Concept Development Plan: Yes No

15. Have you met or discussed your proposed development with any of the following organizations/agencies (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Boone County Building Department | <input type="checkbox"/> Local Fire District |
| <input type="checkbox"/> Boone County Public Works Department | <input type="checkbox"/> Local School District |
| <input type="checkbox"/> Boone County Water District | <input type="checkbox"/> Northern Kentucky Health Department |
| <input type="checkbox"/> Cincinnati Bell | <input type="checkbox"/> Owen Cooperative Electric, Inc. |
| <input type="checkbox"/> Cincinnati/Northern Kentucky International Airport (Kentucky Airport Zoning Commission for height restrictions near the airport) | <input type="checkbox"/> Sanitation District No. 1 |
| <input type="checkbox"/> Duke Energy | <input type="checkbox"/> USDA NRCS/Boone County Conservation District |
| <input type="checkbox"/> Florence Public Services Department | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Kentucky Division of Water | |
| <input type="checkbox"/> Kentucky Transportation Cabinet | |

16. Concept Development Plan Jurisdiction/Location (check all that apply):
 Unincorporated Boone Florence Walton Union

17. Waiver of 60 Day Time Requirement by Originator for Final Planning Commission Action:

In accordance with the provisions of KRS 100.211, the applicant(s) and property owner(s) or originator(s) hereby waive the 60 day time limit for the Boone County Planning Commission to take final action on my (our) Zoning Map Amendment/Concept Development Plan application. This time limit waiver is considered effective immediately upon receipt by the Boone County Planning Commission and expires on _____

ORIGINAL Property Owner's Signature: _____
(Faxed, Photocopied or Scanned Signatures will **NOT** be Accepted)

ORIGINAL Applicant's Signature: _____
(Faxed, Photocopied or Scanned Signatures will **NOT** be Accepted)

SECTION B: (To be completed by Planning Commission staff)

1. Date Received: _____ Fee Received: _____ Receipt #: _____
2. Number of Copies Received: _____
3. Has the following been submitted (check all that apply):
 - Completed Application
 - Concept Development Plan
 - Legal Description
 - Names and Mailing Addresses of Adjacent Property Owners
4. Date the application is Administratively Complete (as defined in KRS 100.211): _____
5. Staff Reviewer: _____
6. Committee Chairperson: _____
7. Scheduled Public Hearing Date: _____
8. Boone County Planning Commission Action: _____ Date of Action: _____
 - _____ Approved
 - _____ Approved with Conditions
 - _____ Denial
 - _____ Other
9. Resolution Number: _____

Boone County Planning Commission
Boone County Administration Building
2950 Washington Street, Room 317
P.O. Box 958
Burlington, Kentucky 41005
Phone: 859-334-2196 Fax: 859-334-2264
plancom@boonecountyky.org
www.boonecountyky.org