



Louisville Metro Planning & Design Services

Standard Application

Case No. 15767 Date: 4-11-11 Intake Staff: AG Amount: \$ 295,500

APPLICATION

Type of Application (EX: Revised Development Plan, LDC Waiver). If there is more than one application submittal, please list the types of applications and applicable LDC Book Section. Detailed District Development Plan

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

Project description EX: retail center and office development, waiver for design standards (this information will be used for hearing notification) Development of an out parcel at Tyler Pointe to build a Goodwill Store and supportive infrastructure.

Statement of Cost for Project: Please provide an estimated cost for this project

Project Cost: \$ 1.3 Mil Projected Infrastructure Improvement Cost (if applicable): \$ 30 K

Name of the Project: Tyler Pointe - Phase 1

Primary Project Address(es): 12523 & 12551 Taylorsville Road

Primary Parcel Id(s): 00470343 & 00470342

Additional Address(es): _____

Additional Parcel Id(s): _____

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Contact Information:

Owner Information & Signature(s): Required for all applications. 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 owner or owner's responsibility to verify all Metro Land Development Code requirements are being followed.

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

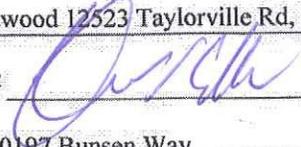
15767

Primary Owner Information: Check if primary contact

Secondary Owner Information: Check if primary contact

Name: Nutwood 12523 Taylorville Rd, LLC

Name: _____

Signature: 

Signature: _____

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: _____

E-mail: dsc@elderconstruction.com

E-mail: _____

Applicant Information: Check if primary contact

Applicant Information: Check if primary contact

Name: Chad Whitaker

Name: _____

Company Name: Alpha Omega Innovations, LLC

Company Name: _____

Title/Capacity: Landscape Architect

Title/Capacity: _____

Address: 2425 Little Union Road

Address: _____

City: Taylorsville State: KY Zip: 40071

City: _____ State: _____ Zip: _____

Primary Phone: 502-299-6678

Primary Phone: _____

Alternate Phone: _____

Alternate Phone: _____

E-mail: chadw@aoibydesign.com

E-mail: _____

Application Detail:

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, Landmark Reviews, Appeals, Conditional Use Permits, Change in Zonings, Minor Plats, etc.

Docket/Case #: 11332

Docket/Case #: _____

Docket/Case #: _____

Docket/Case #: _____

The subject property contains square feet/acres 1.54 + infrastructure Number of APO's: 0

Deed Book/Page: 9234x666 PB 53 pg 88

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Existing Use: Commercial

Proposed Use: Commercial

* Please use the Development Information Sheet (DI) to answer the following questions.

Existing Zoning District: PD

Existing Form District: N

Fire Protection District: Jeffersontown

Council District: 20

CERTIFICATION STATEMENT: (Please fill out applicable section(s).)

Section 1:

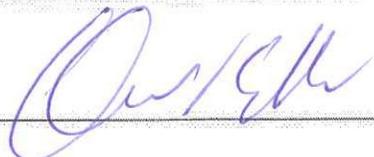
Authorized Agent of a: corporation, limited liability company, partnership, association, trustee, etc.

I hereby certify that Nutwood 12523 Taylorville Rd, LLC is the owner
corporation/limited liability company/partnership/association/trustee/etc.

of the property located at 12523 & 12551 Taylorsville Road

which is the subject of this application, and that I, David Elder
Owner/Representative/Authorized Agent

in my capacity as Partner, am authorized to sign this application
on behalf of the owner.

X Owner/Authorized Representative Signature: 

Print Name: David S. Elder, Sr

Title: Partner Date: 4-7-11

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 duty is punishable as a Class B misdemeanor.

Section 2: Homeowner, Authorized Agent or Representative authorization

I, in my capacity as Owner Representative Authorized Agent (anyone other than the owner fill out section 1)
Check one

of the property located at _____

which is the subject of this application, and that I, _____
Authorized Representative

am authorized to sign on behalf of the owner.

Owner: _____

Print Name: _____

Authorized Representative Signature: _____

Print Name: _____

Phone: _____ E-mail: _____

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 duty is punishable as a Class B misdemeanor.

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