



Submitted by Ann Ramser
9/19/19 Louisville-Jefferson County Metro Government

GREG FISCHER, MAYOR

Record Summary for Wrecking Permit

Record Detail Information

Record Type: Wrecking Permit

Record Status: Reviews
Pending

File Date: May 13, 2019

Record Number: WR1098252

Expiration Date:

Record Name: Wrecking Bldg #1

Parent Record Number:

Address: 2911 S 4TH ST, LOUISVILLE, KY 40208-0000

Owner Information

Primary	Owner Name	Owner Address	Owner Phone
Yes	ROMAN CATHOLIC BISHOP OF LOU	PO BOX 1073, LOUISVILLE, KY 40201-1073	(502) 905-4101

Parcel Information

Parcel No:
050J01660000

Contact Information

Name	Organization Name	Contact Type	Phone
CATHOLIC BISHOP OF LOU ROMAN	CATHOLIC BISHOP OF LOU ROMAN	Applicant	(502) 905-4101
Address			
PO BOX 1073, LOUISVILLE, KY 40201-1073			

Application Specific Information

WRECKING PERMIT

Structure Type	-
Application Type	-
Building Age	119
How did you verify the building age?	PVA
Contract type	PRIVAT
Danger to life, health or property	No
Court order	No
Court Order Date	-

BUILDING PERMITS

Square Footage - Type A	-
Square Footage - Type B	-
Square Footage - Type C	-
No. Stories	3

WWW.LOUISVILLEKY.GOV
METRO DEVELOPMENT CENTER 444 SOUTH 5TH STREET LOUISVILLE, KENTUCKY 40202
FAX



GREG FISCHER, MAYOR

Record Summary for Wrecking Permit**Record Detail Information**

Record Type: Wrecking Permit

Record Status: Reviews

File Date: May 13, 2019

Pending

Record Number: WR1098257

Expiration Date:

Record Name: Wrecking Bldg #2

Parent Record Number:

Address: 2911 S 4TH ST, LOUISVILLE, KY 40208-0000

Owner Information

Primary	Owner Name	Owner Address	Owner Phone
Yes	ROMAN CATHOLIC BISHOP OF LOU	PO BOX 1073, LOUISVILLE, KY 40201-1073	(502) 905-4101

Parcel InformationParcel No:
050J01660000**Contact Information**

Name	Organization Name	Contact Type	Phone
CATHOLIC BISHOP OF LOU ROMAN	CATHOLIC BISHOP OF LOU ROMAN	Applicant	(502) 905-4101
Address PO BOX 1073, LOUISVILLE, KY 40201-1073			

Application Specific Information**WRECKING PERMIT**

Structure Type	-
Application Type	-
Building Age	119
How did you verify the building age?	PVA
Contract type	PRIVAT
Danger to life, health or property	No
Court order	No
Court Order Date	-

BUILDING PERMITS

Square Footage - Type A	-
Square Footage - Type B	-
Square Footage - Type C	-
No. Stories	2

WWW.LOUISVILLEKY.GOV

METRO DEVELOPMENT CENTER 444 SOUTH 5TH STREET LOUISVILLE, KENTUCKY 40202

FAX

Two-Sided Page



Louisville-Jefferson County Metro Government
CONSTRUCTION REVIEW DIVISION
Department of Codes and Regulations
444 S. 5th St. - Louisville, KY 40202
Phone: 502.574.3321 Web Site: louisvilleky.gov/government/construction-review

WR1098252

WRECKING PERMIT APPLICATION

I hereby certify that I am the owner of record or the owner of record authorizes the proposed work and that I have been authorized to make this application as their authorized agent. I understand that any false or inaccurate information on this application or the approved plans may result in revocation of the permit under Kentucky Building Code. No deviation of the approved plan is allowed without approval by this office.

[Signature]

Signature of Owner or Agent

May 13, 2019

Date

Signature of Owner or Contractor

Date

Location: **2911 South 4th Street, Louisville, Kentucky 40208**

(street address is required for all applications)

Work

Description: **Demolition of complete structure including concrete slabs and footings. Removal and proper disposal of all demolition materials.**

Estimated Cost: \$ **125,000.00**

Contractor _____ License # _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____

Owner: **Roman Catholic Bishop of Louisville, A Cororation Sole,** Email: **BZoeller@Archlou.org**
d/b/a Catholic Charities of Louisville
Address: **3940 Poplar Level Road** Phone: **(502)636-0296**
City: **Louisville** State: **Kentucky** Zip: **40213**

Detailed Information

Application Type: ☐ Residential Number of Stories: **2**
☐ Commercial Total Square Footage: **Footprint 3,855; Gross sq ft 7,710**
Contract Type: ☐ Private
☒ City

UTILITY SIGN-OFFS

THE FOLLOWING PRIVATELY OR PUBLICLY OWNED UTILITIES, BEING ALL OR EACH AFFECTED, HEREBY CERTIFY THAT PROPER ARRANGEMENTS HAVE BEEN MADE WITH THEM BY THE APPLICANT. UTILITIES WILL BE CUT OFF AND CAPPED AT THE APPROPRIATE TIME AND PLACE.

/ /	APCD	_____
/ /	LG&E:	_____
/ /	MSD:	_____
/ /	WATER COMPANY:	_____
/ /	PHONE COMPANY:	_____



Louisville-Jefferson County Metro Government

CONSTRUCTION REVIEW DIVISION

Department of Codes and Regulations

444 S. 5th St. - Louisville, KY 40202

Phone: 502.574.3321 Web Site: louisvilleky.gov/government/construction-review

WR109B257

WRECKING PERMIT APPLICATION

I hereby certify that I am the owner of record or the owner of record authorizes the proposed work and that I have been authorized to make this application as their authorized agent. I understand that any false or inaccurate information on this application or the approved plans may result in revocation of the permit under Kentucky Building Code. No deviation of the approved plan is allowed without approval by this office.

B. O. B. M.

Signature of Owner or Agent

May 13, 2019

Date

Signature of Owner or Contractor

Date

Location: **2917 South 4th Street, Louisville, Kentucky 40208**

(street address is required for all applications)

Work

Description: **Demolition of complete structure including concrete slabs and footings. Removal**

and proper disposal of all demolition materials.

Estimated Cost: **\$ 125,000.00**

Contractor _____ License # _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Owner: **Roman Catholic Bishop of Louisville, A Cororation Sole,** Email: **BZoeller@Archlou.org**
d/b/a Catholic Charities of Louisville

Address: **3940 Poplar Level Road** Phone: **(502)636-0296**

City: **Louisville** State: **Kentucky** Zip: **40213**

Detailed Information

Application Type: ☐ Residential

Number of Stories: **2**

☐ Commercial

Total Square Footage: **Footprint 8,960 Gross sq ft 17,920**

Contract Type: ☐ Private

☒ City

UTILITY SIGN-OFFS

THE FOLLOWING PRIVATELY OR PUBLICLY OWNED UTILITIES, BEING ALL OR EACH AFFECTED, HEREBY CERTIFY THAT PROPER ARRANGEMENTS HAVE BEEN MADE WITH THEM BY THE APPLICANT. UTILITIES WILL BE CUT OFF AND CAPPED AT THE APPROPRIATE TIME AND PLACE.

/ / APCD

/ / LG&E:

/ / MSD:

/ / WATER COMPANY:

/ / PHONE COMPANY: