



**City of Jeffersontown**  
Department of Permitting and Enforcement  
10416 Watterson Trail  
Jeffersontown, KY 40299  
Phone: (502) 267-8333 Fax: (502) 267-0547  
[jeffersontownky.gov](http://jeffersontownky.gov)

FOR OFFICE  
USE ONLY

Date: \_\_\_\_\_

## Zoning Confirmation Application

### **Project Information**

This is a Zoning Confirmation Application for the following (check one):

- Motor Vehicle Dealer
- Mobile Home Sales
- Salon
- Commercial Daycare
- ABC License
- Tattoo/Body Piercing Facility
- Other: \_\_\_\_\_

Name of Buisness: \_\_\_\_\_

Primary Address: \_\_\_\_\_

Primary Tax Block & Lot Number: \_\_\_\_\_

### **Contact Information**

(Business Owner, Applicant, or Authorized Representative)

Name: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Signature (required):** \_\_\_\_\_