

MAP AMENDMENT REQUEST (MAR) APPLICATION

1. CONTACT INFORMATION (Name, Address, City/State/Zip & Phone No.)

Applicant: URBAN COUNTY PLANNING COMMISSION, 200 E. MAIN STREET, LEXINGTON, KY 40507
Owner(s): SEE ASSOCIATED NOTIFICATION LIST
Attorney: URBAN COUNTY DIVISION OF LAW, 200 E. MAIN STREET, LEXINGTON, KY 40507 PH: 859-258-3500

2. ADDRESS OF APPLICANT'S PROPERTY

96-171 GOODRICH AVE., LEXINGTON, KY 101-224 LACKAWANNA RD., LEXINGTON, KY 1801-1909 NICHOLASVILLE RD. (ODD ADDRESSES ONLY) LEXINGTON, KY 1855-1859 NORFOLK DR., LEXINGTON, KY 101-177 PENMOKEN PARK, LEXINGTON, KY 1847-1877 PENSACOLA DR., LEXINGTON, KY 108-199 ROSEMONT GARDEN, LEXINGTON, KY 105-175 SUBURBAN CT., LEXINGTON, KY 101-166 WABASH DR., LEXINGTON, KY
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3. ZONING, USE & ACREAGE OF APPLICANT'S PROPERTY

Existing Use		Requested Use		Acreage	
Zoning		Zoning		Net	Gross
R-1C	RESIDENTIAL	R-1C w/ H-1	RESIDENTIAL		92.68±
R-3	RESIDENTIAL	R-3 w/ H-1	RESIDENTIAL		
R-4	RESIDENTIAL	R-4 w/ H-1	RESIDENTIAL		

4. EXISTING CONDITIONS

a. Are there any existing dwelling units on this property that will be removed if this application is approved?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
b. Have any such dwelling units been present on the subject property in the past 12 months?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
c. Are these units currently occupied by households earning under 40% of the median income? If yes, how many units? If yes, please provide a written statement outlining any efforts to be undertaken to assist those residents in obtaining alternative housing.	<input type="checkbox"/> YES <input type="checkbox"/> NO

5. URBAN SERVICES STATUS (Indicate whether existing, or how to be provided)

Roads:	LFUCG
Storm Sewers:	LFUCG
Sanity Sewers:	LFUCG
Refuse Collection:	LFUCG
Utilities:	<input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Water <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Cable

