MAP AMENDMENT REQUEST (MAR) APPLICATION

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

Applicant:				
BERNARD JEFFERY AND PATRICIA M QUEEN, 451 CHAIR AVE, LEXINGTON, KY 40508				
Owner(s):				
BERNARD JEFFERY AND PATRICIA M QUEEN, 451 CHAIR AVE, LEXINGTON, KY 40508				
Attorney:				
Jacob Walbourn, McBrayer McGinnis Leslie & Kirkland, PLLC, 201 East Main Street, Suite 900, Lexington, KY 40507				
2. ADDRESS OF APPLICANT'S PROPERTY				
410 DE ROODE ST LEXINGTON KY				
411 CHAIR AVE LEXINGTON KY				
603 BROADWAY LEXINGTON KY	"			
607 BROADWAY LEXINGTON KY				
615 BROADWAY LEXINGTON KY				
617 BROADWAY LEXINGTON KY				
619 BROADWAY LEXINGTON KY				

3. ZONING, USE & ACREAGE OF APPLICANT'S PROPERTY

		4	Requested	Acr	eage
Zoning	Use	Zoning	Use	Net	Gross
I-1	Vacant	B-1	Commercial	0.21	0.47
B-4	Vacant	B-1	Commercial	0.45	0.79

4. EXISTING CONDITIO

a. Are there any existing dwelling units on this property that will be removed if t application is approved?	☐ YES ☑ NO
b. Have any such dwelling units been present on the subject property in the p12 months?	□ YES ☑ NO
c. Are these units currently occupied by households earning under 40% of median income? If yes, how many units? If yes, please provide a written statement outlining any efforts to be undertaken to assist the alternative housing.	□ YES □ NO ose residents in obtaining

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

Roads:	LFUCG
Storm Sewers:	LFUCG
Sanity Sewers:	LFUCG
↑¬fuse Collection:	LFUCG
ities:	☑ Electric ☑ Gas ☑ Water ☑ Phone ☑ Cable

