



MONITORING PLAN & RE-CERTIFICATION APPLICATION 2009 UNIVERSITY DISTRICT CERTIFICATION

Please type or write legibly.

Date: _____

Name of Applicant: _____
(Organization under which original approval was granted.)

Property Location: _____

Name of Property Owner: _____

Mailing address: _____

Telephone Number: _____

Email: _____

***Name of Resident Representative:** _____

Mailing address: _____

Telephone Number: _____

Email: _____

***Housing Corporation Representative:** _____

Mailing Address: _____

Telephone Number: _____

Email: _____

National Organization: _____

Address: _____

Telephone number: _____

***These are the persons responsible for on-site compliance with Monitoring Plan and Site Plan and will be the contact person for local officials, University and surrounding property owners. Signature is sworn statement acknowledging responsibility, and same shall constitute irrefutable presumption of responsibility hereunder.**

Resident Representative Signature(s)

Housing Corporation Representative Signature (s)

Property Owner (s)

Supporting information to include with application:

- Policy with regard to social functions. Policy should include date and time of each function, type of event, when the house will be open to the public and/or other organizations, admissions charged. See website for an example of an acceptable policy. www.warrenpc.org/university_district/index.php.
- Policy with regard to property maintenance and exterior condition. Policy should include how often lawn will be mowed, when trashed will be picked up, how often dumpsters are emptied, etc. See website for an example of an acceptable policy. www.warrenpc.org/university_district/index.php.
- Letters of compliance with all fire, building, and maintenance codes from the Fire Marshall and the Building Inspector.
- Police call response forms.
- Neighbor Survey Form (Neighbors include each side, across the street in front and to the rear of the property.)
- Site Plan if your **organization is being reviewed for the first time** or your **organization has made changes to the structure or property since the original approval**.

Return this completed form and the above attachments to:

University District Review Committee
City-County Planning Commission
1141 State Street
Bowling Green, KY 42101

A \$50 additional fee is due when Re-certification is deficient and University Board has to reconvene.

If you have questions call Marshall at 270.842.1953 or e-mail marshall.robinson@bgky.org .

FOR STAFF USE ONLY

Reviewed by: _____ Date: _____

Monitoring Plan Approved: _____ Date: _____

Conditions:

Monitoring Plan Denied: _____ Date: _____

Reasons for denial:
