



911 Service Fee Waiver Shelby County E-911

501 Main Street

Shelbyville, KY 40065

Phone: 502-647-9001 Fax: 502-647-5509

Email: 911fee@shelbycoky.com

1. Property Address _____

2. Map Number on Tax Bill _____

3. Type of Structure on Site:

Single Family Home Module Home Multi Family

Commercial Structure Industrial Structure

Other: (i.e. Storage Building)

4. # of Units on Tax Bill = _____ Current # of Units = _____

5. Please provide a detailed explanation to support the difference in number of units. For example Converted from multi-family to single-family. You may attach additional sheets if needed.

6. Is this rental property? YES or NO

if "yes" how many units were vacant as of January 1 of current year? _____

7. Total number of 911 Service Fess you are asking to be waived because of unit being unoccupied January 1st of current Year? _____

8. Total dollar amount of fees you are asking to be waived? \$_____

Applicants Name: _____

Applicants Mailing Address: _____

City

State

Zip

Phone Number : _____ Email: _____

Are you the property Owner? YES or NO

If "NO" what is your relationship to the property? _____

SIGNATURE: I hereby certify that I represent all owners of the property and that the information contained in this application and attachments is true and correct any that any misrepresentation or misstatement of facts shall be grounds for denial of appeal and/or refund.

Property Owner or Representative's Signature

Date