



IMPROVEMENT LOCATION PERMIT (BUILDING PERMIT) APPLICATION

OFFICE USE ONLY

PERMIT #: _____ RECEIVED DATE: _____
PERMIT TYPE: [] RSFR [] RAD [] RAC [] RMF [] CAC [] CRM [] P [] C [] DEMO [] OTHER: _____

APPLICANT INFORMATION

BUILDER OF RECORD (COMPANY): _____ TELEPHONE: _____
ADDRESS: _____
NAME OF CONTACT PERSON: _____ EMAIL: _____
PROPERTY OWNER'S NAME: _____ TELEPHONE: _____
ADDRESS: _____ EMAIL: _____

PROPERTY INFORMATION

LOT #: _____ SECTION #: _____ SUBDIVISION: _____ ZONING DISTRICT: _____
ADDRESS OR PROPERTY LOCATION: _____
COUNTY PARCEL ID #(S): _____ CURRENT USE: _____
TYPE OF WATER SUPPLY: [] PUBLIC SYSTEM NAME OF SYSTEM: _____
[] PRIVATE SYSTEM WELL PERMIT #: _____
TYPE OF SEWAGE DISPOSAL: [] PUBLIC SYSTEM NAME OF SYSTEM: _____
[] PRIVATE SYSTEM PRIVATE / SEPTIC PERMIT #: _____
IS THE PROPERTY IN A SPECIAL FLOOD HAZARD AREA, AS ESTABLISHED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY - NATIONAL INSURANCE PROGRAM (FEMA-NFIP), AS PER FLOOD INSURANCE RATE MAP (FIRM)? [] YES [] NO
FEMA-NFIP PANEL #: _____ IF YES, FLOOD ZONE DESCRIPTION: _____

IMPROVEMENT INFORMATION

RESIDENTIAL NON-RESIDENTIAL TYPE OF IMPROVEMENT
[] ONE-FAMILY DETACHED [] RETAIL / COMMERCIAL [] NEW STRUCTURE
[] TWO-FAMILY ATTACHED [] OFFICE / PROFESSIONAL [] ADDITION / REMODEL
[] TOWNHOMES (____ UNITS) [] HOTEL / MOTEL (____ ROOMS) [] COMMERCIAL TENANT SPACE
[] DETACHED ADDITION [] INDUSTRIAL [] DEMOLITION
[] ATTACHED ADDITION [] MULTI-FAMILY (____ UNITS) [] AGRICULTURAL STRUCTURE
[] COVERED DECK OR PORCH [] ACCESSORY BUILDING [] SWIMMING POOL
[] ACCESSORY BUILDING [] INSTITUTIONAL [] OTHER: _____
[] OTHER: _____ [] OTHER: _____

SQ. FT. UNDER ROOF (INCLUDE PORCHES, GARAGES, HABITABLE ATTIC): 1ST FLOOR: _____ 2ND FLOOR: _____ BASEMENT: _____
LIVING AREA SIZE: _____ SQ. FT. BUILDING SIZE: _____ SQ. FT. FOUNDATION TYPE: _____
ESTIMATED COST OF CONSTRUCTION (EXCLUDING LAND): \$ _____ STATE CDR #: _____
ENERGY CODE METHOD: [] PERFORMANCE [] PRESCRIPTIVE [] UA PLUMBING CODE? [] UPC [] IRC

CERTIFICATION AND NOTICE OF INTENT TO COMPLY

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that construction will comply with, and conform to all applicable laws of the State of Indiana. I further certify that the construction will conform to the regulations in the Building Code, the Zoning Ordinance, or private, of the governing jurisdiction, which may imposed on the above property by deed. I further certify that the construction will not be used or occupied until proper certificates of occupancy and compliance are filed with the governing jurisdiction.

Authorized Agent (signature) Authorized Agent (printed) Date

WESTFIELD-WASHINGTON TOWNSHIP APPLICATION FORM
IMPROVEMENT LOCATION PERMIT APPLICATION



REQUIRED PERMIT APPLICATION ATTACHMENTS:

ONE (1) PRINTED COPY PLUS ONE (1) DIGITAL (PDF) COPY OF THE FOLLOWING SHALL BE INCLUDED WITH APPLICATION:

- LEGAL DESCRIPTION OF PROPERTY (IF NOT LOCATED WITHIN A RECORDED SUBDIVISION)
- SITE PLAN SHOWING:
 - PROPERTY LINES
 - LOCATION OF EXISTING STRUCTURES (LABELING SIZE AND DIMENSIONS FROM PROPERTY LINES)
 - LOCATION OF RIGHT-OF-WAY AND ALL EASEMENTS (DRAINAGE, UTILITY)
 - SCALE, NORTH ARROW, ADDRESS (AND/OR SUBDIVISION LOT #)
- IMPROVEMENT BLUEPRINTS OF:
 - SCALE, ADDRESS (AND/OR SUBDIVISION LOT #)
 - FOUNDATION PLAN
 - FLOOR PLAN OF EACH FLOOR SHOWING WINDOW LOCATIONS, DOOR LOCATIONS, ETC.
 - CROSS SECTION DRAWING OF STRUCTURE SHOWING FOOTING THROUGH SHINGLES DENOTING SIZES OR THICKNESS OF ALL MEMBERS USED IN CONSTRUCTION
- ELEVATIONS OF ALL SIDES OF STRUCTURE LABELING:
 - ROOF PITCHES
 - BUILDING HEIGHT
 - EXTERIOR BUILDING MATERIALS (INCLUDING % OF FACADE OF EACH MATERIAL, IF REGULATED)
 - ANY OTHER ARCHITECTURAL FEATURES REGULATED BY APPLICABLE ZONING DISTRICT
- LANDSCAPE PLAN (OR FOR SINGLE-FAMILY APPLICATIONS, A SIGNED ACKNOWLEDGEMENT OF THE LANDSCAPING REQUIREMENTS, WHICH WILL BE INSPECTED FOR COMPLIANCE AT THE FINAL INSPECTION)
- SEPTIC SYSTEM PERMIT AND WELL PERMIT (NEW CONSTRUCTION ONLY) FROM APPLICABLE AGENCY (HAMILTON COUNTY HEALTH DEPARTMENT, PROOF OF CONNECTION TO STATE APPROVED PRIVATE UTILITY)
- DRIVEWAY CUT APPROVAL FROM HAMILTON COUNTY HIGHWAY DEPARTMENT (IF ALONG COUNTY ROAD)
SPECIFICATIONS OF ENGINEERED MATERIALS
 - TRUSS
 - FLOOR JOISTS
- ENERGY CERTIFICATE(S)
- STATE CONSTRUCTION DESIGN RELEASE (CDR)
- EROSION CONTROL APPLICATION
- ACKNOWLEDGEMENT OF EMERGENCY ESCAPE OPENING AFFIDAVIT (IF APPLICABLE)

DEPARTMENT NOTES:

*OFFICE
USE ONLY*