



IMPROVEMENT LOCATION PERMIT (BUILDING PERMIT) APPLICATION

OFFICE
USE ONLY

PERMIT #: _____ RECEIVED DATE: _____
 PERMIT TYPE: RSFR RAD RAC RMF CAC CRM P C 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

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