

Residential Permit #

Improvement Location Permit Application

Hendricks County Planning & Building
355 S. Washington Street Suite G80, Danville IN 46122
317-745-9255

Owner Information

Name: _____

Address: _____
Address City State Zip code

Telephone: _____ E-mail: _____

Property Information

Township: _____ Square Feet of Lot: _____ Lot Acreage: _____

Address: _____
Address City State Zip code

County Parcel: _____ State Parcel: _____
Subdivision

Zoning District: _____ Name: _____

Date the Parcel was created: _____ Subd. Sec: _____ Subd. Lot No: _____

Surveyor/Engineer Information

Name: _____ E-mail: _____

Builder Information (if same as owner sign & check affidavit)

Name: _____

Address: _____
Address City State Zip code

Telephone: _____ E-mail: _____

Contact information for permit pick up: _____ E-mail: _____ Affidavit: ☐

Improvement Type

Proposed Characteristics/Square Footage

Structure:	Work:	Use:
<i>Principal</i> <input type="checkbox"/>	<i>New</i> <input type="checkbox"/>	<i>Single</i> <input type="checkbox"/>
<i>Detached Garage</i> <input type="checkbox"/>	<i>Addition</i> <input type="checkbox"/>	<i>Two</i> <input type="checkbox"/>
<i>Storage</i> <input type="checkbox"/>	<i>Remodel</i> <input type="checkbox"/>	<i>Multi</i> <input type="checkbox"/>
<i>Solar Panel</i> <input type="checkbox"/>	<i>Demo</i> <input type="checkbox"/>	<i>Commercial</i> <input type="checkbox"/>
<i>Other</i> <input type="checkbox"/>	<i>Electrical</i> <input type="checkbox"/>	<i>Industrial</i> <input type="checkbox"/>
	<i>Other</i> <input type="checkbox"/>	<i>Mobile</i> <input type="checkbox"/>

Floors _____	1st _____
Bedrooms _____	2nd _____
Full Bath _____	Bonus Room _____
1/2 Bath _____	Bsmt Finished _____
Foundation _____	Bsmt Unfinished _____
Exterior _____	Covered Porch _____
Height _____	Garage _____
Total Sq Ft _____	Living Sq Ft _____

Construction Cost \$

New Meter/Relocate/Upgrade: Yes /No

Utilities

Source of:

Water: Public ☐ Well ☐
Sewage Disposal: Sewer ☐ Septic ☐
Electrical Power: Duke ☐ HPC ☐ IPL ☐
Gas Appliances? Yes ☐ No ☐

Plumber: _____

Outlet into regulated drain?
Yes or No (Circle One)

If yes, please see Surveyor's Office

Affidavit of Applicant

- 1.) No work shall be started before a permit has been posted or continued if the permit has been destroyed, lost, or stolen. Any person who violates this Hendricks County Zoning Ordinance or fails to comply with any of its requirements shall, upon conviction, be fined in accordance with the ordinance and in addition, shall pay all costs and expenses involved.
- 2.) If construction of building has already commenced, an Affidavit of Compliance is required.
- 3.) The permit shall be posted in a conspicuous location, visible from the street, on the premises, and shall remain in place during the entire period of construction. No inspection shall be performed without a posted permit.
- 4.) A re-inspection fee may be charged as defined by the "Building Inspection and General Requirements" form. This fee must be paid prior to scheduling the re-inspection.
- 5.) The permit becomes void if an inspection has not been completed/scheduled within a year. Construction must be completed within two years.
- 6.) If any changes or deviations are made from the original application, a new permit (with payment of required fees) shall be required.
- 7.) The undersigned shall be responsible to schedule all building inspections.
- 8.) The structure shall not be occupied until all inspections have been made and approved and a Certificate of Occupancy has been issued.
- 9.) The undersigned owner or agent understands the approval of this application does not constitute a privilege to violate any applicable governmental ordinances, codes or laws. In addition, any commission or misrepresentation of fact, with or without intention of the undersigned, or any alteration or change from this application, without approval of the Building official, shall constitute sufficient grounds for the revocation of any permit issued which was based on the approval of this application.

Applicant Signature

Applicant Signature

Date Submitted

Applicant Printed Name

Taken By

For Office Use Only

Permit #: _____

Permit Fee: \$ _____

Date Issued: _____

Issued By: _____

Reviewed By: _____

Review Date: _____

Floodplain Panel#: _____

Zone: ☐ X ☐ AE ☐ A

PC Case: _____

BZA Case: _____

Phone Number for

Permit Pick Up: _____ Zoning Violation: _____