

Commercial 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 Name: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Name: \_\_\_\_\_

Date the Parcel was created: \_\_\_\_\_ Subd. Sec: \_\_\_\_\_ Subd. Lot No: \_\_\_\_\_

## Surveyor/Engineer Information

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Builder Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Address City State Zip code

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact information for permit pick up: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Improvement Type

## Proposed Characteristics/Square Footage

<b>Structure:</b>	<b>Work:</b>	<b>Use:</b>
<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>Other</i> <input type="checkbox"/>	<i>Demo</i> <input type="checkbox"/>	<i>Commercial</i> <input type="checkbox"/>
<i>Conveyor</i> <input type="checkbox"/>	<i>Electrical</i> <input type="checkbox"/>	<i>Industrial</i> <input type="checkbox"/>
<i>Sorter/Racking</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: _____
Engineer Inspector: _____	Release Date: _____
Reviewed By: _____	Review Date: _____
Floodplain Panel#: _____	Zone: <input type="checkbox"/> X <input type="checkbox"/> AE <input type="checkbox"/> A
PC Case: _____	BZA Case: _____
Phone Number for Permit Pick Up: _____	Zoning Violation: _____