



# The Town of Zionsville, Indiana

1100 West Oak Street, Zionsville, Indiana 46077

## Application for Improvement Location Permit, Multifamily, Commercial, Industrial

SITE INFORMATION: Rural:  Urban:

Address of Property:	Name of Subdivision/Development:
Lot Number:                      Zoning:	Parcel Number:
Existing Use:	(If Applicable) Health Department Permit Number:
Proposed Use:	(If Applicable) Drainage Permit Number:
Twp:    E    P    U    W    Area of Lot:	(If Applicable) Driveway Permit Number:

### APPLICANT (BUILDER-CONTRACTOR)

### PROPERTY OWNER

Name:	Name:
Address:	Address:
Phone Number:	Phone Number:
E-mail:	E-mail:

### PROJECT INFORMATION

<b>Use:</b> <input type="checkbox"/> Multi Family:      Number of Units:                      Number of Buildings: <input type="checkbox"/> Commercial: <input type="checkbox"/> Industrial: <input type="checkbox"/> Demolition <input type="checkbox"/> Other (Describe):	
<b>Type of Construction:</b> <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Other (Describe): <input type="checkbox"/> I-Joists - Floor/Ceiling <input type="checkbox"/> Trusses - Ceiling	
Area of New Construction:	Area of Existing Structures:                      Total Area:
Estimated Cost of Construction:	
Road Impact Calculation Sheet: <input type="checkbox"/> Included <input type="checkbox"/> N/A	
Plumber:	Plumber License No.

### SET BACKS

Front:	Side:	Side:	Rear:
Parking/Loading:	Front:	Side:	Rear:
Maximum Height:	Required # Parking Spaces:	Parking Spaces Provided:	

### FLOODPLAIN DATA (To be completed only if the site is within a 100-year floodplain)

Elevation of 100-year Flood:                      feet	Minimum Flood Protection grade:                      feet
Minimum Flood Protection grade:                      feet	First Floor elevation above mean sea level:                      feet
<i>An elevation certificate signed by a land surveyor, engineer or architect is required if the site is located in a floodplain</i>	
Lead Based Paint: Per the Indiana Administrative Code 4101AC 32 and U.S. Code of Federal Regulation 40 CFR I acknowledge that have reviewed and if necessary have submitted all necessary information to the Indiana State Department of Health regarding lead based paint that presently exists in this structure. <input type="checkbox"/> Yes <input type="checkbox"/> N/A	

### FIRE DEPARTMENT INFORMATION – FIRE SUPPRESSION / FIRE ALARM SYSTEMS

Fire Alarm System included in this project: <input type="checkbox"/> Yes <input type="checkbox"/> N/A	Fire Alarm Suppression System included in this project <input type="checkbox"/> Yes <input type="checkbox"/> N/A
<b><i>If your project or the project area contains a Fire Alarm, Sprinkler System, Kitchen Hood System or any other Special Hazard System, please contact the Fire Marshal at 317-873-5358.</i></b>	

The undersigned hereby certifies that the above information is true and correct as (s)he is informed and believes and agrees, that as a condition of making this application and of its issuance, to conform to the building code of the Town of Zionsville and all instructions and directions of the Building Commissioner and Inspectors and further that the improvements authorized by this permit will not be used or occupied until a certificate of occupancy has been issued by the Town of Zionsville, Indiana.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed: \_\_\_\_\_