

# APPLICATION FOR BUILDING PERMIT AND CERTIFICATE OF OCCUPANCY TOWN OF AVILLA, INDIANA

(Please fill out in ink)

No. \_\_\_\_\_

Date Filed \_\_\_\_\_

The undersigned agrees that any construction, reconstruction, enlargement, relocation or alteration of structure, or any change in use of land or structure, requested by this application will comply with and conform to all applicable laws of the State of Indiana and Ordinances of the Town of Avilla adopted under the authority of Chapter 174, General Assembly of the State of Indiana, and all acts amendatory thereto.

Name of Owner \_\_\_\_\_ Phone No. \_\_\_\_\_

Address of Owner \_\_\_\_\_

Name and Address of Contractor \_\_\_\_\_

Location of Property: Lot No. \_\_\_\_\_ in \_\_\_\_\_ Addition \_\_\_\_\_

Street No. or other description of Location \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Township \_\_\_\_\_ Zoning Classification \_\_\_\_\_

Present Use of Property \_\_\_\_\_

NOTE: Every application for a Building Permit shall be accompanied by a site plan, drawn to scale in ink, showing the location of the structure, improvement, or use to be altered, placed, erected, or located, the dimensions of the lot to be improved, the size of yards and open spaces, existing and proposed streets and alleys adjoining or within the lot, and the manner in which the location is to be improved.

Signed \_\_\_\_\_ Owner By \_\_\_\_\_ Agent

(Spaces below to be filled in by Owner)

Size of Proposed Building: \_\_\_\_\_ ft. x \_\_\_\_\_ ft. Area: Living Sq. ft. \_\_\_\_\_

Basement Sq. Ft. \_\_\_\_\_

Garage Sq. Ft. \_\_\_\_\_

Check one: Bldg \_\_\_\_\_ Deck \_\_\_\_\_ Fence \_\_\_\_\_ Electric Upgrade \_\_\_\_\_

Type of material to be used: \_\_\_\_\_  
(brick, frame, block, etc.)

Front yard \_\_\_\_\_ ft. Side Yards: Left \_\_\_\_\_ ft. Right \_\_\_\_\_ ft. Rear Yard \_\_\_\_\_ ft.

Estimated Cost of Construction \$ \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_

This is to certify that \$ \_\_\_\_\_ was received this \_\_\_\_\_ day for a Zoning Permit fee

(Spaces below to be filled in by Plan Director)

Disposition:

BUILDING PERMIT: Issued \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

If denied, state reasons: \_\_\_\_\_

CERTIFICATE OF OCCUPANCY: Issued \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

If denied, state reasons: \_\_\_\_\_

Signed \_\_\_\_\_

Zoning Inspector