

BUILDING PERMIT APPLICATION

City of Elkhart, Indiana
229 S. 2nd Street, Elkhart, IN 46516
Building Inspector: Paul Goodwin
(574)294-5471 ext. 1009

OFFICE USE ONLY

PERMIT #:

ALT PARCEL #:

DATE ISSUED:

ACCEPTED BY:

PROPERTY OWNER INFORMATION

Owner's Name:

Phone #:

Owner's Email Address:

Is Owner the Applicant? Yes No

PROPERTY INFORMATION

Property Address:

of Units:

of Stories:

Occupancy: Occupied Vacant How long has it been occupied/vacant?

Type of Structure: Commercial Residential

DESCRIPTION OF WORK INFORMATION

Class of Work: Accessory Structure Addition Alteration/Repair Demolition

Fire Suppression Foundation Only Moving Structure New Structure Pool Storage Tank

Foundation Information: Material: Type: Footing Depth:

Total Square Feet of Structure to be Built (or Demolished):

Habitable Square Feet (for New Builds or Additions ONLY):

Estimated Value of Work: \$

Description of Work:

COMMERCIAL USE ONLY

Proposed Building Occupancy Classification:

Type of Construction:

State CDR #: Scope of Release: Fnd Arch Str Spk Mech Plum Elec

Fire Sprinklers? Yes No (**Note:** a separate permit is required for a Fire Suppression System)

CONTRACTOR INFORMATION (if applicable)

Contractor/Company Name:

Phone #:

Contractor's Email Address:

NOTICE: SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING OR AIR CONDITIONING. THESE PERMITS MUST BE SECURED BY THE LICENSED CONTRACTOR. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 365 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Signature of Owner or Authorized Agent

Printed Name

Date