



APPLICATION FOR BUILDING PERMIT

PROPERTY OWNER: _____ DATE: _____

DESCRIPTION OF WORK TO BE DONE: _____

_____ PHONE: _____

PROPERTY ADDRESS AND LEGAL DESCRIPTION: _____

SETBACKS: FRONT: _____ REAR: _____ SIDE YARDS: _____

LOT SIZE: _____ FLOOD ZONE (CIRCLE ONE): YES / NO

ESTIMATED COST OF WORK TO BE DONE: _____

CONTRACTOR'S NAME: _____

CONTRACTOR'S ADDRESS: _____

CONTRACTOR'S PHONE # _____ CELL # _____

COMPANY OWNER'S NAME: _____

COMPANY OWNER'S ADDRESS: _____

COMPANY OWNER'S PHONE # _____ CELL # _____

SEWER FACILITIES: NONE: _____ TOWN: _____ SEPTIC: _____

WATER FACILITIES: NONE: _____ IAW: _____ WELL: _____

ESTIMATED TIME OF COMPLETION: _____

THIS APPLICATION MUST BE ACCOMPANIED BY A SITE PLAN OF THE PREMISES SHOWING SIZE AND LOCATION OF ALL EXISTING AND PROPOSED STRUCTURES, WHEN REQUIRED. THE APPLICANT FURTHER AFFIRMS THAT THE SAID BUILDING, WHEN CONSTRUCTION IS COMPLETE, SHALL BE AS HEREIN DESCRIBED. CONTRACTORS AND OWNERS SHALL AGREE TO COMPLY WITH ALL STATE OF INDIANA CODES AND THE ORDINANCES OF THE TOWN OF PORTER.

SIGNED: _____

OWNER OR AGENT

FEE: _____

APPROVED: _____

Michael S. Barry, Building Commissioner
Cell Phone: 219-405-8615