

CLASS 2 (RESIDENTIAL) DEVELOPMENT
PERMIT APPLICATION

ILP ____ - _____, STR ____ - _____, DRN ____ - _____, DRV ____ - _____				DROP OFF # _____	
A. ADDRESS: _____ SUBDIVISION NAME: _____ SECTION: _____ LOT: _____			L. EST VALUE: _____		M. # OF STORIES: _____
			N. EXIST SF: _____		O. ADD SF: _____
B. OWNER OR LESSEE OF THE PROPERTY: NAME: _____ ADDRESS: _____ CITY STATE ZIP CODE TELEPHONE NUMBER: (_____) _____ - _____			P. LOAD CONSTRUCTION TYPE: ____ 1) CONCRETE ____ 2) ENGINEERED ____ 3) MASONRY ____ 4) POST & BEAM ____ 5) STEEL ____ 6) WOOD FRAME		
			Q. FOUNDATION TYPE: ____ 1) BLOCK ____ 2) CRAWLSPACE ____ 3) ENGINEERED ____ 4) EXISTING ____ 5) FINISHED BASEMENT ____ 6) OTHER ____ 7) POST & BEAM ____ 8) SLAB ____ 9) UNFN BASEMENT ____ 10) WOOD		
			R. DRIVEWAY CONSTRUCTION: ____ 1) NEW ____ 2) REPAIR #OF ACCESSES _____ WIDTH _____ SURFACE TYPE _____		
			S. SPECIAL DISTRICTS/APPROVALS: ____ 1) FLOODWAY/FLOODPLAIN FLD ____ - _____ ____ 2) HISTORIC DISTRICT _____ EXCLUDED CITY ____ BEECH GROVE ____ LAWRENCE ____ SOUTHPORT ____ SPEEDWAY		
C. USE: ____ ONE FAMILY ____ TWO FAMILY			T. INCLUDED IN PROJECT: ____ ELECTRICAL ____ HVAC ____ PLUMBING		
D. EXIST ZONING: _____			U. CONTRACTOR/APPLICANT INFORMATION & DRIVEWAY INDEMNIFICATION AGREEMENT: The petitioner/applicant hereby agrees to hold harmless, defend and to indemnify the Department of Code Enforcement, the Department of Public Works and the City of Indianapolis from and against all claims, actions, damages and expenses, including but not limited to reasonable attorney's fees on any alleged injury and/or death to any person or damage to any property arising, or alleged to have risen out of any act of commission or omission on the part of the petitioner/applicant, his/her heirs, successors or assigns regardless of whether such acts are the direct or indirect result of the Public Right-of-Way Use pursuant to this permit grant. I affirm, under the penalties for perjury, that the following representations are true and the required plot plan and building plans are complete and accurate. YOUR NAME (PRINT): _____ SIGNATURE: _____ DATE: _____ BUSINESS NAME: _____ <div>(AS IT APPEARS ON CONTRACTOR'S I.D. CARD)</div> ____ Contractor Business I.D. No. Contractor Individual I.D. No. BUSINESS PHONE: (_____) _____ - _____ EMAIL ADDRESS: _____		
E. COMMITMENTS: ____ YES ____ NO					
F. PETITION NUMBER: _____					
G. THOROUGHFARE TYPE: _____					
H. TYPE OF STRUCTURE: ____ 1) PRINCIPAL ____ 2) ACCESSORY ____ 3) STORAGE BLD ____ 4) DET GAR ____ 5) OTHER: _____ ____ 6) POOL _____ <div>Fence / Pool Cover Installer</div>					
I. EXISTING IMPROVEMENTS: _____					
J. PROPOSED IMPROVEMENTS: _____					
K. DEVELOPMENT STANDARDS:					
PRIMARY/ATTACHED		ACCESSORY/DETACHED			
REQUIRED	PROPOSED	REQUIRED	PROPOSED		
____ FRONT	____	____ FRONT	____		
____ SIDE 1	____	____ SIDE 1	____		
____ SIDE 2	____	____ SIDE 2	____		
____ SIDE AGG	____	____ SIDE AGG	____		
____ REAR	____	____ REAR	____		
____ MAIN FL AREA	____	____ FLOOR AREA	____		
____ ATT GAR	____				
____ MAX HEIGHT	____	____ HEIGHT	____		
____ # OF STORIES	____	____ # OF STORIES	____		
____ TOT LIV AREA	____				
# OF UNITS _____		BLDG AREA _____		COV OPEN SPC _____	
REQUIRED		PROPOSED			
____ % OPEN SPACE		____			
____ FRONTAGE		____			
____ # OF PARKING SPACES		____			
____ LOT WIDTH		____			
____ LOT AREA		____			