Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
permits@crawfordsville-in.gov | 765-364-5152

IMPROVEMENT LOCATION PERMIT APPLICATION INSTRUCTIONS

For comprehensive information on ***Improvement Location Permits***, please refer to ***Chapter 8 of the Unified Development Ordinance***.

A. **Permits Required.** An Improvement Location Permit issued by the Administrator is required prior to beginning construction on structures or establishing a use on any land.

   a. Except for variances approved by the Board of Zoning Appeals or an order of a court, an improvement location permit will not be issued for the erection, alteration, or use of any building or structure, or for the use of any land unless it complies with all provisions of this Ordinance and any conditions of approval imposed on the building, structure, or use.

   b. A record of all improvement location permits is kept on file in the office of the Administrator.

   c. Vacant land cannot be used and existing uses of land or buildings cannot be changed to a different class of use unless an improvement location permit is first obtained for the new or changed use. Uses resulting in an increase in parking spaces require an Improvement Location Permit.

B. Submittal Requirements. The application must include the following information unless waived in writing by the Administrator.

1. A site plan showing the locations of all proposed improvements with dimensions noted which includes location of the dwelling, other buildings, any streams or ponds, easement and rights-of-way
2. Floor plans of all floors, including basement (if applicable)
3. A typical wall section including truss print (if applicable)
4. Plumbing plan
5. Electrical plan
6. List of contractors

***Please note that certain types of construction may require plans that are stamped by an architect or professional engineer.**

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IMPROVEMENT LOCATION PERMIT APPLICATION

OFFICE USE ONLY

DOCKET # _____ FILED DATE: _____

FILING FEE: $ _____

APPLICANT INFORMATION

Applicant Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

Property Owner's Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

Representative's Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

PROPERTY INFORMATION (Attach Legal Description)

Project to be known as: _____

Address or Property Location: _____

Acreage: _____ Zoning District: _____ Existing Land Use: _____

County Parcel ID #(s): _____

PROJECT INFORMATION (Attach Applicable Plans)

Size of Improvement: Width _____ Length _____ Height _____ Total Sq. Ft. _____

No. of Sewer Taps: _____ Water Meter Size: _____

Estimated Cost of Construction: _____ Estimated Completion Date: _____

I certify that I own or control the property involved in this application, and that the information in this application is true and correct.

_____

Signature of Applicant/Representative

_____

Print Name

_____

Date

Crawfordsville INDIANA

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LIST OF CONTRACTORS

Type of Service: ____________________ Contractors Registration No.: ____________
Company Name: ____
Address: ____
Contact Name: ____________________ Telephone No.: ____________

Type of Service: ____________________ Contractors Registration No.: ____________
Company Name: ____
Address: ____
Contact Name: ____________________ Telephone No.: ____________

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PROPERTY OWNER AFFIDAVIT

IN WITNESS WHEREOF, the undersigned, having duly sworn, upon oath says they are the owners of the property involved in this application and that they hereby acknowledge and consent to the foregoing Application.

_____ _____

Property Owner (Signature) Property Owner (Printed Name)

Before me the undersigned, a Notary Public in and for said County and State, personally appeared the above party, who having been duly sworn acknowledged the execution of the foregoing instrument.

Witness my hand and Notarial Seal this _____ day of _____, 20_____.

State of _____, County of _____, SS:

_____

Notary Public Signature

_____

Notary Public (Printed Name)