

<i>For Office Use Only</i>	PERMIT NUMBER: _____	STATE DESIGN RELEASE NUMBER: _____	RULE 5: _____
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PERMIT TYPE

- | | | | | |
|---------------------------------------|---------------------------------------|-------------------------------------|------------------------------------|--------------------------------|
| <input type="checkbox"/> Conventional | <input type="checkbox"/> Multi-Family | <input type="checkbox"/> Demolition | <input type="checkbox"/> Garage | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Manufactured | <input type="checkbox"/> Remodel | <input type="checkbox"/> Commercial | <input type="checkbox"/> Pole Barn | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Addition | <input type="checkbox"/> Accessory | <input type="checkbox"/> Electric | <input type="checkbox"/> Tower |

Project Address: _____ Town: _____ Zip: _____

ZONING:

- AG R1-A RMH MXD B2 I2
 R1 R2 RMHA B1 I1 PUD RDD

Zoning info can be found on the Newton County GIS/Beacon (see County website for details)

Legal Description: _____ Township: _____

Subdivision: _____ Lot: _____ Lot Size/Acreage: _____

Parcel ID Number: _____ Tax ID Number: _____

Structure Type: Modular / Mobile / Wood Frame / Masonry / Steel / Aluminum / Reinforced Concrete / _____
(CIRCLE ONE) [OTHER]

Flood Plain: Yes No Septic Permit #: _____ Well Permit #: _____ Est. Project Cost: \$ _____

SIZE OF BUILDING	FOUNDATION TYPE	EXTERIOR WALLS	TRUSSES	FLOOR JOISTS
WIDTH: _____ ft.	<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Masonry Bearing	<input type="checkbox"/> Manufactured	<input type="checkbox"/> Manufactured
LENGTH: _____ ft.	<input type="checkbox"/> Poured Concrete	<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Rafters	<input type="checkbox"/> Traditional
HEIGHT: _____ ft.	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Structural Steel	*Manufactured trusses must include design release	*Manufactured joists must include designer's specs
TOTAL: _____ sq. ft.	<input type="checkbox"/> Basement	<input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Crawlspace			

ELECTRICAL SERVICE	RESIDENTIAL DETAILS	SETBACKS (ft.)
<input type="checkbox"/> 2 Wire	<input type="checkbox"/> Temporary	_____ Front
<input type="checkbox"/> 3 Wire	<input type="checkbox"/> Permanent	_____ Rear
<input type="checkbox"/> Single Phase	_____ Number Bedrooms	_____ Side
<input type="checkbox"/> 3-Phase	_____ Number Bathrooms	_____ Side
<input type="checkbox"/> 30 A <input type="checkbox"/> 200 A	_____ Total Rooms	
<input type="checkbox"/> 60 A <input type="checkbox"/> 400 A	Other: _____	
<input type="checkbox"/> 100 A <input type="checkbox"/> 600 A		

HEATING/HVAC/MECHANICAL SYSTEM(s)	FIREPLACE	WATER FIXTURES
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Solid Fuel <input type="checkbox"/> Other: _____	<input type="checkbox"/> Chimney/Permanent	Total Number: _____
<input type="checkbox"/> Oil <input type="checkbox"/> Solar <input type="checkbox"/> Fireplace <input type="checkbox"/> Central Air	<input type="checkbox"/> Insert <input type="checkbox"/> N/A	

APPLICANT/OWNER INFO

Applicant Name: _____ Date of Application: _____

Address: _____

Primary Phone: _____ [Work / Home] Secondary Phone: _____ [Work / Home]

E-mail: _____ Owner of Real Estate: _____

CONTRACTOR	CONTRACTOR NAME	PHONE NUMBER	REGISTRATION NUMBER
	General _____	_____	_____
	Electrical _____	_____	_____
	Plumbing _____	_____	_____
	Mechanical _____	_____	_____
	Excavation _____	_____	_____
	Concrete _____	_____	_____
	Carpentry _____	_____	_____
	Roofing _____	_____	_____
	Insulation _____	_____	_____
	Drywall _____	_____	_____
	Masonry _____	_____	_____
	Painting _____	_____	_____
	Gutters _____	_____	_____
	Other _____	_____	_____

THE APPLICANT ACKNOWLEDGES THAT THE INFORMATION CONTAINED IN THIS FORM IS PART OF THIS APPLICATION AND THAT THE APPLICANT IS BOUND BY SAID INFORMATION.

Applicant's Signature: _____ ***SEE BACK/PAGE 2 FOR ADDITIONAL INFORMATION**

Received Permit Fee: \$ _____ Date: _____ Approved By: _____

SUBMITTAL REQUIREMENTS

THE FOLLOWING STEPS NEED TO BE COMPLETED TO OBTAIN A BUILDING PERMIT:

1. Driveway permit from Newton County Highway Department [(219) 285-2595]
2. Septic and well permits from Newton County Health Department [(219) 285-2052]
3. Completed Building Permit Application [Previous Side]
4. Plat of Survey and/or site plan showing the following:
 - a. Lot dimensions
 - b. Locations and dimensions of all improvements
 - c. Detailed and accurate outer measurements of all structures in the project
 - d. Setbacks from all property lines, septic, well, and structures
5. Building prints/plans
 - a. Footing & Foundation
 - b. Floor Plans
 - c. Cross Section
 - d. Manufacturer Specifications for Manufactured Trusses, Joists, etc.

INSPECTION SCHEDULE

THE OWNER OF A PERMIT IS REQUIRED TO NOTIFY THE BUILDING DEPARTMENT DURING WORKING HOURS, AT LEAST 24 HOURS IN ADVANCE, WHEN CONSTRUCTION IS READY FOR INSPECTION.

INSPECTIONS REQUIRED:

1. Footing Pre-pour [Prior to pouring concrete]
2. Foundation [Prior to Backfilling]
3. Rough-in [Prior to Insulation]
4. Insulation [Prior to drywall/wallboard]
5. Final [Prior to occupancy]

INSPECTION OF WORK FOUND TO BE INCOMPLETE OR NOT READY FOR INSPECTION IS SUBJECT TO AN ASSESSMENT OF A RE-INSPECTION FEE OF \$30.00.

BUILDING PERMIT FEES

RESIDENTIAL PERMITS ARE FIGURED AT 20 CENTS PER SQUARE FOOT.

COMMERCIAL PERMITS ARE FIGURED AT 40 CENTS PER SQUARE FOOT.

MINIMUMS AND MAXIMUMS ARE AS NOTED BELOW.

<u>TYPE</u>	<u>MINIMUM</u>	<u>MAXIMUM</u>
Single-Family Dwelling	\$200. ⁰⁰	\$400. ⁰⁰
Multi-Family Dwelling*	\$100. ⁰⁰ per unit	\$100. ⁰⁰ per unit
Manufactured	\$200. ⁰⁰	\$400. ⁰⁰
Mobile Home	\$100. ⁰⁰	\$200. ⁰⁰
Addition/Remodel	\$100. ⁰⁰	\$200. ⁰⁰
Garage/Post Frame	\$100. ⁰⁰	\$200. ⁰⁰
Accessory	\$50. ⁰⁰	\$100. ⁰⁰
Commercial*	\$400. ⁰⁰	\$1,000. ⁰⁰

*All multi-family and commercial permits require a \$30.⁰⁰ fee per inspection, payable upon Final Inspection

PERMIT & PETITION FEES

Electric	\$50. ⁰⁰
Swimming Pool	\$100. ⁰⁰
Signs [Larger than 4 sq. ft.]	\$100. ⁰⁰
Change of Land Use	\$200. ⁰⁰
Variance	\$150. ⁰⁰
Special Exception	\$150. ⁰⁰
Subdivision	\$200. ⁰⁰
Minor Subdivision	\$100. ⁰⁰

The applicant represents that all details of the proposed structure will comply in all respects with minimum requirements as provided in the Building and Zoning Ordinances of Newton County, Indiana, and of the State Building Code of the State of Indiana.

Initials of Applicant

The applicant acknowledges and agrees that any violation of the county ordinances or state law with respect to building or zoning, as well as failure to abide by the terms of this application will result in legal action by the Building Commissioner.

Initials of Applicant

The applicant further acknowledges and agrees that any such legal action required on behalf of the Newton County Building Commissioner will be at the expense of the applicant, including, but not limited to, court costs and attorney's fees.

Initials of Applicant

The applicant has read, understood, and agrees to the above statements and policies.

Initials of Applicant