

PULASKI COUNTY BUILDING DEPARTMENT

125 South Riverside Drive - Suite 150, Winamac, IN 46996

574-946-7858 Cell: 574-242-2046 FAX: 574-946-4917

zoning@pulaskicounty.in.gov

PERMIT #

BUILDING PERMIT APPLICATION

Date ____/____/____

Project Address: _____ City/Town: _____, IN

Township: _____ Subdivision: _____ Lot #: _____

Parcel No. 66-_____ Lot size/acreage: _____

Directions to project site: _____

Applicant Name: (print) _____

Applicant Signature: _____

Address: _____ City: _____, IN Zip Code _____

Phone (Cell) Number: _____

E-mail Address: _____

Ownership Name: (if different from applicant) _____

Address: _____ City: _____, IN Zip Code _____

Phone (Cell) Number: _____

CONSTRUCTION TYPE: Commercial ____ Residential ____ Agricultural ____ Recreational ____

Interior Type: floor _____ counter _____ cabinets _____ trim _____ custom? _____

Structure Type: Wood * Masonry * Steel-reinforced * Concrete * Aluminum * Plastic * Pole * Other _____

Accessory Structure Floor Type: Brick * Concrete * Dirt * Gravel * Other _____

Proposed project: (circle) New Residential Home * New Commercial * Interior Remodel * Exterior Remodel
Addition * Car Port * Deck * Electrical * Fence * Garage * Gazebo * HVAC * Lean-to * Patio * Porch * Plumbing
Pole Barn * Pool * Re-roof * Shed * Solar Panel * Windows/Doors * Demo * Other-

General contractor for project: _____

Contractor phone number: _____ Contractor registration # _____

Calculation of permit costs: Length _____ Width _____ Height _____
Length _____ Width _____ Height _____

Residential

Do you have required health department release: _____ Permit _____ Septic _____ Water well _____ Town _____

_____ Electric \$50 _____ Plumbing \$50 _____ HVAC \$50 _____ Pool \$50 _____ Demo \$25

Resident sq. ft: _____ Porch _____ Gazebo _____ Shed _____
Finished basement _____ Att Garage _____ Detached Garage _____ Deck _____

Finished square feet total: _____ + _____ = _____ x _____ per sq ft = \$ _____

Unfinished square feet total: _____ + _____ = _____ x _____ per sq ft = \$ _____

Flat rate fee: \$ _____ **TOTAL RESIDENTIAL PERMIT FEE: \$ _____**

* Additional fees/permitting apply for inspections beyond 4th contact. Ag exempt permitting does not include inspections*

Commercial/Industrial

Total square feet: _____ x _____ per sq ft = \$ _____ + Filing fees: \$ _____ =

TOTAL COMMERCIAL PERMIT FEE: (Max \$5,000.00) \$ _____

Project # _____ Release Date ____ / ____ / _____

Estimated Cost of Project \$ _____

Estimated Completion Date _____ / _____ / _____

Zoning District: _____ Zoning Permit # _____

100yr Flood plain: IN _____ (SFHA: Floodway _____, DNR permit required Floodway Fringe _____)

Documents submitted: Construction _____ Site plan _____

The undersigned certifies that the proposed work is authorized by the owner of record and that the undersigned has been authorized by the owner to make this application as the authorized agent and agrees to conform to all applicable laws of this jurisdiction. The undersigned furthermore agrees that any construction, reconstruction, enlargement, alteration of structure, or any change in use of land or structure requested by this application shall comply with all applicable laws of the State of Indiana, Ordinances of the county of Pulaski, and all amendments thereto.

If there is any misrepresentation in this application or any associated documents, Pulaski County may revoke any permit or Certification of Occupancy issued based upon misinformation. It is understood that access to the property under construction/remodel will be available for work inspection during reasonable working hours. Building permits are in effect for a period of one (1) year from application date. If construction exceeds the one year period, a notice must be given to the Building Department. Additional fees may be required. Be advised that all building codes enforced are the adopted building code for the State of Indiana.

I agree I have received a copy of zoning standards based on property zoning guidelines as set by Pulaski County. _____ (initial)

Signature of applicant _____ / ____ / _____
Date

Permit #: _____ Cost: \$ _____ Receipt No.: _____ Approve: _____ Deny: _____

Building Commissioner Signature: _____ Date: ____ / ____ / _____

NOTICE OF ASSESSMENT REGISTRATION: An owner of real property, or the owner's agent, is required to file this notice with the County Assessor before demolishing, structurally modifying, or improving property. Be advised that under IC 6.1-5-15 Indiana Code that civil penalty of \$100.00 can be levied against the owner or agent for non-filing. Total building permit fee schedule available upon request.