



City of New Albany
 Douglas B. England - Mayor
 Building Commissioner -

Approved
Planning: _____
Sewer: _____
Building: _____

APPLICATION FOR BUILDING PERMIT

Permit Type:

- New Construction
- Addition to Existing Building
- Remodeling/Tenant Finish (Interior/Exterior)
- Demolition
- Accessory Structure
- Other _____ (i.e. pool/deck)

Date: _____

Site Address: _____

Applicant's Name: _____

Applicant's Mailing Address: _____

Phone: _____ Work: _____ Cell: _____

Owner's Name: _____

Project Description/Type: _____

For Single Family Dwellings only:

Style of SFD _____
 (i.e. 2 Story/Att. Garage/Basement)

of Bedrooms: _____ # of Baths: _____

BUILDING:

Overall Dimensions: _____ X _____ Total Sq. Ft.: _____

Total Square Footage of Finished Basement: _____

Cost of Construction: \$ _____

Subcontractors:

MUST BE LICENSED IN THE CITY OF NEW ALBANY

Electric: _____ Plumbing: _____ HVAC: _____

For Office Use Only

Plat #: _____	Lot #: _____
Zoning: _____	Docket: _____
FBS #: _____	Parcel #: _____

**NEW ALBANY CITY PLAN COMMISSION
NEW ALBANY BOARD OF ZONING APPEALS**

Room 329, City-County Building
311 Hauss Square
New Albany, Indiana 47150
Tel: 1.812.948.5333
Fax: 1.812.981.3776

**APPLICATION FOR
IMPROVEMENT LOCATION PERMIT**

Attach a copy of the Property Survey, Site Plan, and Assessor's Plat to this application

NAME OF APPLICANT: _____ TELEPHONE: _____

APPLICANT'S FACSIMILE: _____ APPLICANT'S EMAIL ADDRESS: _____

ADDRESS OF APPLICANT: _____

NAME OF PROPERTY OWNER: _____ TELEPHONE: _____

OWNER'S FACSIMILE: _____ OWNER'S EMAIL ADDRESS: _____

ADDRESS OF PROPERTY OWNER: _____

LOCATION OF PROPERTY: _____
(Common Address)

APPLICATION IS HEREBY MADE TO (Check ALL That Apply)

- CONSTRUCT A NEW BUILDING
- CONSTRUCT AN ADDITION TO AN EXISTING BUILDING
- ALTER AN EXISTING BUILDING (*Interior Only*)
- ALTER AN EXISTING BUILDING (*Exterior Only*)
- DEMOLISH AN EXISTING BUILDING
- REPAIR AN EXISTING BUILDING
- CHANGE USE OF THE PROPERTY
- OTHER: _____

(Explain)

PRESENT USE OF THE PROPERTY: _____

PROPOSED USE OF PROPERTY: _____

I AGREE, IF GRANTED A PERMIT FOR THE ABOVE-DESCRIBED BUILDING AT THE LOCATION DESIGNATED IN THE CITY OF NEW ALBANY OR ITS TWO-MILE FRINGE AREA JURISDICTION, THAT I WILL OBSERVE AND CONFORM TO ALL LAWS, ORDINANCES, AND REGULATIONS AFFECTING BUILDING AND THE USE OF LAND, INCLUDING ZONING ORDINANCE NUMBER Z-71-449 AND ALL ORDINANCES AMENDATORY THEREOF AND SUPPLEMENTAL NOW IN FORCE IN THE CITY OF NEW ALBANY, AND, I CONSENT TO INSPECTION OF THE PREMISES FOR WHICH THIS PERMIT IS GRANTED BY THE PLAN COMMISSION, BOARD OF ZONING APPEALS, THEIR STAFFS, OR THEIR DESIGNEES OR AGENTS, DURING AND ON COMPLETION OF THE CONSTRUCTION AUTHORIZED. **THIS IS NOT A BUILDING PERMIT.** YOU MUST STILL APPLY FOR AND RECEIVE A BUILDING PERMIT FROM THE DIVISION OF INSPECTION PRIOR TO COMMENCING CONSTRUCTION.

Signed Name

Printed Name

Date

Do NOT Write Below This Line

Report of Staff:

THE PROPERTY IS ZONED: _____

IN PLAT NUMBER: _____

ON LOT NUMBER: _____

OTHER: _____

FLOOD ZONE VERIFICATION: _____

F.I.R.M PANEL NUMBER: _____

F.I.R.M. EFFECTIVE DATE: _____

PREVIOUS ZONING ACTION ON THIS PROPERTY

DATE OF HEARING: _____

DOCKET NUMBER: _____

OUTCOME: _____

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- APPROVED AS SUBMITTED
- APPROVED SUBJECT TO THE FOLLOWING:
 - PLAN COMMISSION ACTION REQUIRED
 - BOARD OF ZONING APPEALS ACTION REQUIRED
- DENIED

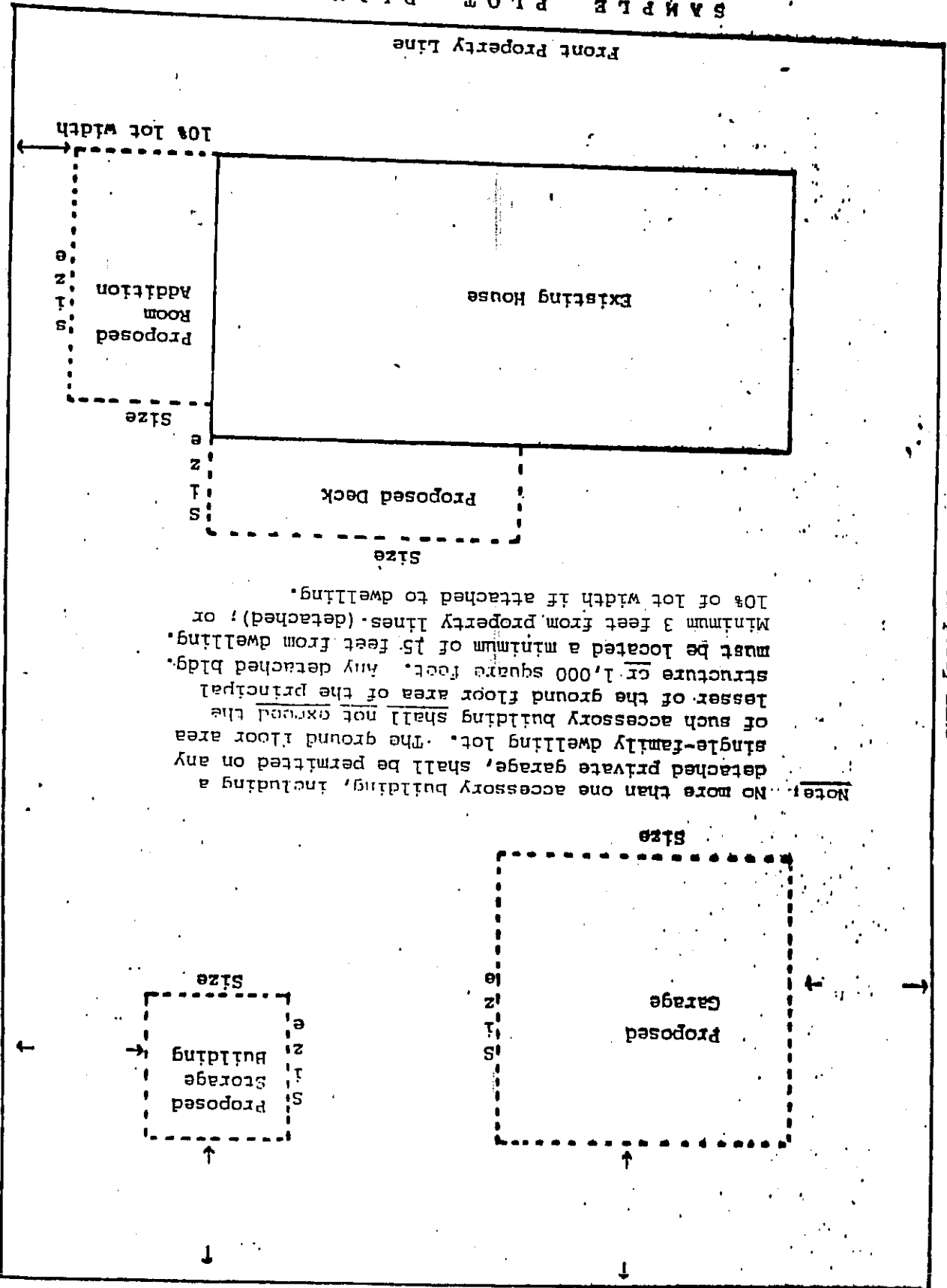
Staff Signature

Title

Date

(Several samples of additions, accessory structures given) (In consideration of what you may be proposing to build.) (Use blank sheet of paper to indicate your proposal; this) (is JUST A SAMPLE for your convenience.)

SAMPLE PLOT PLAN



Property Line

David Brewer
Building Commissioner

Doug England
Mayor

812-948-5333 office
812-948-5325 fax

City-County Building
Room 329
311 Hauss Square
New Albany, Indiana 47150



CERTIFICATE OF COMPLIANCE FOR INDIVIDUAL LOTS
Individual Lots Less than 1 acre

Date _____ Lot # _____ Subdivision Name _____

Site Address _____

Applicant/Contractor _____	Phone _____
Address _____	Contact Name _____
City _____	State _____ Zip Code _____
Owner _____	Phone _____
Address _____	Contact Name _____
City _____	State _____ Zip Code _____

I hereby certify that I have reviewed the Stormwater Pollution Prevention Plan prepared by the Developer's Engineer and approved the City of New Albany. I acknowledge that as a condition of this certificate, I am responsible for assuring that lot grading be done in accordance with the approved Grading Plan, that site drainage be done in accordance with the approved Drainage Plan, and that adjacent properties will not be adversely impacted;

I hereby certify that I will abide with the requirements of the City of New Albany Construction Site Runoff Control Ordinance G-06-09 section 9.0 Requirement for Individual Lots. I further understand and acknowledge that as a condition of the certificate, I am responsible for assuring that appropriate construction practices and sediment controls are utilized, I am responsible for assuring the practices of all contractors and sub-contractors employed for the purpose of this permitted construction shall conform to appropriate sediment control practices, I am responsible for assuring the appropriate selection, installation, and maintenance of said sediment control practices, I am responsible for assuring that site construction practices do not interfere with any required perimeter/outfall protection control practices as noted on plans approved the City of New Albany, I am responsible for assuring adjacent properties, public roadways, and receiving waters will not be adversely impacted.

Signature of Agent _____ Date ____ / ____ / ____