#### AGRICULTURAL BUILDING

(Information needed to process your application)

Does property have e	xisting build	ings?	Yes	No	)	List type.
Specific use of propo	sed structure	?				
Type of taxes paid or	property?					
Number of acres farm	ned					
Provide copy of Sche	dule F filed v	with inco	ome taxe	S.		
Do you sell agricultu	ral products?	Who	olesale _		Retail	
Business license?	Yes	No		Гуре?		
General use of proper	rty?					
Will building have:	Electric ho Type of Flo Plumbing Heating Office Area	or mat				
Will access to building (If you are putting in Highway Department	a new drivew	ay you v	will need	to cont	act the Ha	amilton County
You will also need to	provide:					
Two (2) copies of th look like.	e drawings s	howing	what all	four si	des of the	e structure will
Two (2) copies of the	floor plan sl	nowing a	ny parti	tioned o	r section	ed off areas.
Two (2) copies of the as well as the well, s need to identify the se	septic tank a	nd field	area, an	d the di	iveway.	You will also
Two (2) copies identi	fying the cor	ntents to	be stored	d in the	structure	
Signature			Date			
Please print nar	me					Hamilton County Plan Commandobe Downloadable Fo

#### **HAMILTON COUNTY PLAN COMMISSION**

One Hamilton County Square, Suite#306 Noblesville, Indiana 46060-2230 Phone: (317) 776-8490

Certificates of Occupancy shall be issued prior to use and/or occupancy of Construction of this Project shall start **DEMOLITION ONLY** within three(3) months of the date of this all structures covered by this permit. Occu-**BUILDING PERMIT APPLICATION** pation of any structure prior to the issuance permit or the permit will expire. All work must be completed within **IMPROVEMENT LOCATION PERMIT** of a C/O, will result in a penalty of \$250 being assessed. (18) months for Primary structures, and **POOL PERMIT** (9) months for Accessory structures. PARCEL# TOWNSHIP: Full Release Adams Conditional Release PERMIT # Noblesville Foundation Only Wayne Structure Only White River Electrical Only Apv'd by \_\_\_\_\_ Date Subdivision Name Center Name Zone Erosion Control Property Size: \_\_\_\_\_ Split Date: District \_\_\_ Plan Required: Yes No \_\_\_\_\_\_ Structure Elev. \_\_\_\_\_ Map # \_ Flood Plain Elev. \_\_\_\_\_ City Project Address \_\_\_\_\_ \_\_\_\_\_ Address \_\_\_\_ Owner's Name Owner's Fax Number Owner's Email Address \_\_\_\_\_ Builder's / Contractor's \_\_\_\_\_ Address \_\_\_\_\_ Name Builder's/Contractor's Fax Number \_\_\_\_\_ Builder's/Contractor's Email Address \_\_\_\_ Arch/Eng. Name \_\_\_\_\_ Address \_\_\_ \_\_\_\_\_ Phone \_\_\_\_ \_\_\_\_\_ License# \_ Registration# Proposed Land Use: Existing Land use: OTHER APPROVALS REQUIRED: TYPE OF PERMIT: Change of Use Improvement Location Retail Commercial Water Permit # \_\_\_\_ Office Single Family Septic/Sewer Permit # Road Cut Permit # Duplex Manufacturing Multi-Family \_\_\_\_ Warehouse Other B. 7. A. Doc. # TYPE OF IMPROVEMENT: P. C. Doc. # Primary Ag. Bldg. Finish Tenant Space Drainage/Surveyor New Structure Addition Site-Land Improvements CONDITIONS: Garage Home Occupation Structural Alteration Accessory Structure Swimming Pool Other \_\_\_\_ **BUILDING INFORMATION:** Total Height in Feet Above Ground Total Square Feet Including Basement Type of Construction: Post/ Beam Wood Masonry Metal Roof Truss, Manufactured: Yes Truss Supplied By No Geo Thermal Type of Heat: Gas Electric Solar Wood Type of Water Heater: Geo Thermal Gas Electric Solar Foundation: Slab Basement Crawl \_ Central Air Conditioning \_\_ Fireplace: Masonry Pre-Fab. Metal Patio/Deck (Type) Garage (# Bays) Screened Porch CERTIFICATION AND NOTICE OF INTENT TO COMPLY Signature of Person Responsible for Construction I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction will conform to the regulations in the Building Code, the Zoning Ordinance, or private building restrictions, if any, which may be imposed on the above property by deed. Home or Pool Owner I, further certify that the construction will not be used or occupied until the proper certificates of occupancy and compliance are filed with the office of the Hamilton Date County Plan Commission.

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### \*\*APPLICANT MUST COMPLETE THIS PAGE\*\*

#### **CONSTRUCTION INFORMATION**

GENERAL OR PRIMARY CONTRACTOR:	
NAME:	
ADDRESS:	
PHONE:	
FAX:	
EMAIL	
IS PROPERTY OWNER THE GENERAL	OR PRIMARY CONTRACTOR?
YES	NO
SUB-CONTRA	<u>ACTORS</u>
FOUNDATION:	
EXCAVATORS	PHONE
FOOTINGS	PHONE
FOUNDATION WORK:	
BASEMENT	PHONE
CRAWL/SLAB	PHONE
ROUGH-IN:	
FRAMING	PHONE
PLUMBING	
ELECTRICAL	PHONE
HVAC	
FIREPLACE	
FIREBLOCKING	PHONE
ENERGY:	
INSULATION	PHONE
FINAL:	
FINISH CARPENTER	PHONE
FINAL GRADING	
DIRECTOR\INSPECTOR	
	Hamilton County Plan Commission

**DATE** 

Hamilton County Plan Commission
Hamilton County Government & Judicial Center
One Hamilton County Square
Suite 306
Noblesville, IN 46060

#### **MEMO**

TO: Builders, contractors, sub-contractors, homeowners

FROM: Charles Kiphart, Director

DATE: January 01, 2013

RE: Ordinance definitions of building appurtenances setbacks from property line.

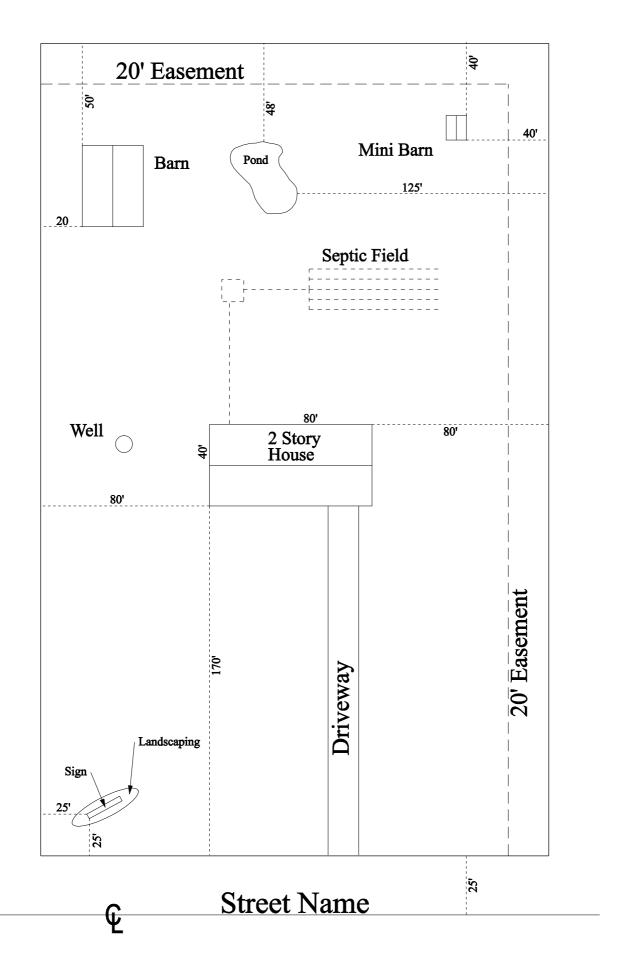
When determining the required zoning yard setback the following definition of a structure or building shall apply unless otherwise stated in the zoning ordinance. Please be advised that the definition of a building or structure includes all appurtenances attached to or a part of the building or structure. Appurtenances include but are not limited to roof eves/gutters; cantilever projections, attached window wells, chimneys, decks, bay windows, wing walls, etc.

Front yard setbacks are to be measured from the centerline of the road to the structure.

Revised: 12/12/2013 Hamilton County Plan Commission Adobe Downloadable Form

# You will need to identify which code you intend to use for electrical installation / upgrades at:

Address of project:		
	Indiana Electric Code	2009 Edition adopted 08/26/2009
	OR	
	Indiana Residential Code	2005 Edition adopted 04/02/2008
	trical re-inspections will be into the submitted at the time year.	nspected per the code as indicated ou file your application.
Print your name		
Sign your name		
Date		



## **EXAMPLE SITE PLAN**