



INCORPORATED FEBRUARY 4, 1893

# CITY OF ALEXANDRIA

## Improvement Location Permit/Building Permit

125 N. Wayne St. ~ Alexandria ~ Indiana ~ 46001  
765-724-4633 Ph. ~ 765-724-7373 Fax

- \* This entire application must be completed in its entirety and must be legible (please print).
- \* All required documentation must be attached to this application.
- \* Permit expires 12 Month from Date of Signature of Building Official – penalties will apply.

**Owner's Information:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
(Please Print)

Address: \_\_\_\_\_ Work #: \_\_\_\_\_  
(City, State and Zip)

**Property Information:** (Attach additional page if necessary)

Property Address: \_\_\_\_\_  
(City, State and Zip)

Legal Description: \_\_\_\_\_ Lot No.: \_\_\_\_\_  
(Subdivision Name)

Property Dimensions: \_\_\_\_\_ Tax ID: \_\_\_\_\_  
(Acres or Lot Size)

Parcel Number: \_\_\_\_\_ *Tax ID or Parcel No. can be retrieved from the  
Madison County Auditor's Office (641-9401)*

**Contractor Information:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
(Please Print)

Address: \_\_\_\_\_ Work #: \_\_\_\_\_  
(City, State and Zip)

**Construction Information:** (Attach Drawings of New Construction)

Improvement (what are you building): \_\_\_\_\_

Approximate Cost: \$ \_\_\_\_\_ Square Ft./Dimensions: \_\_\_\_\_

Exterior Finish Type (Brick, Vinyl Siding, Painted Wood, etc.): \_\_\_\_\_

Height: \_\_\_\_\_ Foundation Type:  Basement  Slab  Crawl Space # of Garage Bays: \_\_\_\_\_

- Type of Construction:  Stick Built  
 Modular  
 Pre-Manufactured

\* All Modular and Pre-Manufactured Structures require Board of Zoning Appeals (BZA) approval

Will Pre-Engineered Products be used? Such as, Trussing, I-Joists, Lam-Beams, etc.:  Yes  No  
*If yes, include specifications sheet of each item.*

# of Bathrooms: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_ # of Stories: \_\_\_\_\_

Type of Heat: \_\_\_\_\_ Water Heater: \_\_\_\_\_ Type/Size of Deck/Patio: \_\_\_\_\_

**Utility Information:**

Please list what City Utilities you are connecting to. You must check with the Utility Office to confirm if City Utilities are available to your site. If they are not, arrangements must be made with the local Utility to connect to City Water and Sewer before this permit will be issued.

City Water       City Sewer       City Storm Sewer

**Required Documentation:**

Please state YES or NO if you have included the information below:

1. Site Plan:  Yes  No

*Must include property lines with dimensions to all existing and proposed building, and dimensions of the improvement.*

2. Building Plans/Blueprints::  Yes  No

*Must include all rooms, room sizes and dimensions, electrical layout, plumbing layout, HVAC layout, roof pitch, type of interior and exterior.*

3. Pre-Manufactured Data:  Yes  No

*If any pre-manufactured products are being used (such as Trussing, wall framing sections, I-beams, floor joists, etc.), data sheets that include the Manufacturer's information must be included.*

4. Licensed Plumber Information: (All contracted plumbing to be installed by a licensed plumber.)  Yes  No

Name: \_\_\_\_\_ Company: \_\_\_\_\_ License #: \_\_\_\_\_

5. Flood Plain Information: Is the property in a...

Flood Plain?:  Yes  No      Flood Zone?:  Yes  No      Flood Elevation?:  Yes  No

**Signature(s):**      Signature of Land Owner or Contractor: \_\_\_\_\_      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Sign Name(s) Here

\_\_\_\_\_  
Print Name(s) Here

**For Office Use Only:**

Permit #: \_\_\_\_\_      Fees: \_\_\_\_\_      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Receipt #: \_\_\_\_\_      Check #: \_\_\_\_\_      Zoning: \_\_\_\_\_

**Set Backs:**      Front: \_\_\_\_\_      Rear: \_\_\_\_\_      Side(s): \_\_\_\_\_

Special Conditions/Variations: \_\_\_\_\_

**Inspection Dates:**      Footer: \_\_\_\_\_      Foundation: \_\_\_\_\_      Rough-In: \_\_\_\_\_

Final: \_\_\_\_\_      Certificate of Occupancy: \_\_\_\_\_      Violations: \_\_\_\_\_

Signature of Building Official: \_\_\_\_\_      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_