**City of Gas City**

**Commercial & Industrial Building Permit Application**

Includes any structure more than Two Family Dwellings

Permit No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Office use only)

Property Owner/Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

General Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Excavation Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foundation Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electrical Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of work being performed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New structure or addition square footage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

CHECK ONE OF THE FOLLOWING:

\_\_\_\_ New Structure \_\_\_­\_ Addition \_\_\_­\_ Exterior Remodel (includes roof)

\_\_\_\_Electrical \_\_\_\_ Mechanical \_\_\_­\_ Plumbing \_\_\_\_Demolition

Demolition is the responsibility of owner for all testing in compliance with state mandate

Current Use of Building:

\_\_\_\_ Apartments \_\_\_\_ Restaurant \_\_\_\_ Church \_\_\_\_ School \_\_\_\_ Retail

\_\_\_\_ Industrial \_\_\_\_ Storage Facility \_\_\_\_ Gas Station \_\_\_\_ Wireless Tower

(See Other Side of Form)

Conditions of Permit Application

The Administrative Officer and the Gas City Advisory Board of Zoning Appeals:

Filed with this application, and hereby made a part of this application, is a plot plan, drawn to scale, showing the size and location of the lot or tract above described, the size and location of present buildings or structures thereon, the size and location of the proposed construction thereon.

Application is hereby made for a Zoning/Building Permit in conformity with the requirements of the Zoning General Ordinance No. 68-5, as amended and restated by General Ordinance No. 85-4, and the amendments thereto, for the following construction:

Applicant(s) hereby states that the statements in this application and accompanying instruments are true and correct and that the proposed construction, above described, shall be made in compliance with the Zoning/Building Permit, which may be issued, pursuant to this application and subject to the terms and provisions as provided in the Zoning General Ordinance and amendments thereto, of the City of Gas City, Indiana

The undersigned agrees to complete the proposed project within the time limit of said permit, when reasonable, and that all debris and materials will be removed from the property and/or stored so as not to become a hazard or nuisance to the area.

All inspections shall be scheduled 24 hrs. in advance.

I hereby certify that I have read and examined this permit and know all information provided by myself to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

APPLICANT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Receipt # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_

(Office Use Only)

BSK Rev 10-5-2020