TOWN OF TRAFALGAR

COMMERCIAL BUILDING PERMIT APPLICATION

LOCATION OF WORK:	APPLICANT: (required)	
Address:	Name:	
Subdivision:	Address:	
Section: Lot:	Phone#	
GENERAL CONTRACTOR (if applicable)	PROPERTY OWNER (required)	
Name:	Name:	
Address:	Address:	
Phone#	Phone#	
SITE CONTRACTOR (if applicable)	DESCRIPTION OF WORK:	
Name:		
Address:		
Phone# NATURE OF WORK (circle all that apply)		
NATURE OF WORK (CITCLE ALL MAL APPLY)	VALUE OF CONSTRUCTION \$	
Building Site Work Only	GROSS FLOOR AREA (SQFT)	
•		
TYPE OF STRUCTURE: (circle one)	LIVING AREA (SQFT)	
Primary Structure Accessory Structure	HEIGHT OF TALLEST POINT (FT)	
TYPE OF USE: (circle one)	AREA OF LAND (Acres)	
Single-Family Residential Commercial	REMODEL/ADDITION (SQ FT)	
Multi-Family Residential Other		
DOCUMENTS NEEDED: The following docu	iments must accompany this application:	
(1) Site Location Map (2) Site Plan (3) Waste Disp (5) Dwelling Units-if applicable (6) Construction Designation Plans - Non Residential (8) Set of Construction Plans -	· · · · · · · · · · · · · · · · · · ·	
Certification: The undersigned affirms under the penalties and correct. (2)The required plot plan and construction plan for all applicable laws and ordinances. (4)Applicant understanot obviate the need to comply with applicable laws and ordinance the Town of Trafalgar, Indiana for any losses, claims, or liabil contractor, subcontractor, or supplier's errors of omission and	s are complete and accurate. (3) Applicant will be responsible ands that approval of the plans and issuance of permits does inances. (5) Applicant agrees to hold harmless and indemnify lity resulting from the undersigned, his/her agent, principle,	
APPLICANT'S NAME (PRINT)	PHONE #	
APPLICANT'S SIGNATURE & DATE		

TOWN OF TRAFALGAR

COMMERCIAL BUILDING PERMIT CHECKLIST

- Builder/Contractor current Bond and License with Town of Trafalgar on file (Bond of \$20,000 and Town License Fee of \$100)
- All Building Permit applications must include the following items: A site plan, drawn to scale, including the following information:

The dimensions of the lot

The names and right of way width of all adjacent streets and alleys

All easements and required building setback lines

All existing and proposed utilities

All existing buildings on the property with dimensions

The zoning of the property

All the land and floor elevations

The lot number and subdivision or legal description

Sidewalk placement and width

A north arrow

 Two sets of construction drawings, including the following information (if in a subdivision, Plans must be approved by Homeowners Association and/or Developer):

A Foundation Plan

A Floor Plan

Building Elevations

An Electrical Plan (layout, service size and location)

A Plumbing Plan (fixture placement, hot water heater, lateral location)

An HVAC Plan

A Wall Section detail showing all material

A Roof Framing detail (pitch, materials, spans, and layout)

All engineered products must be documented and certified with an

Indiana Registered Engineer Stamp

- A completed Building Permit Application
- Design Release Form from Indiana Dept. of Homeland Security
- Plan Authentication Certificate & completed Plan Authentication Certificate and Agreement form
- Please note that when the permit is picked up the permit fee, sewer tap fee and water hook up fee (if applicable) are to be paid in full to the Town of Trafalgar

Department of Planning & Zoning – 2770 W. State Road 252 – Trafalgar, In Phone: (317) 878-5194 Fax: (317) 878-4402 Website: www.townoftrafalgar.org

TOWN OF TRAFALGAR

PLAN AUTHENTICATION

CERTIFICATION & AGREEMENT

As the person eligible and responsible for obtaining a permit or permits as required by Town of Trafalgar Zoning Ordinance and in accordance with 675IAC 12-6-6 & 12-6-7, and based upon information contained within these plans, I certify that these plans are accurate and true to those submitted for construction to the Indiana Department of Homeland Security Plan Review. I also understand that if it is determined that these plans are not accurate and true; all permits obtained as a result of their submittal may be revoked.

I further assert, represent, and agree that if the subject plans are not accurate and true to those submitted to the Indiana Department of Homeland Security Plan Review, that I will indemnify and hold harmless the Town of Trafalgar from any and all damages incurred by the Town of Trafalgar as a result thereof, and therefrom, including but not limited to attorney fees, litigation costs, expert witness expenses, and other related financial expenditures.

I HEREBY AFFIRM, UNDER PENALTIES AND PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE AND ACCURATE.

	Printed Name	
	Signature	Date
SEAL:		
STATE OF INDIANA		
COUNTY OF JOHNSON		
Before me, a notary public in and for said State an	d County, personally appeare	d
and they, being first duly sworn by me upon their	oath, stated that the facts alle	ged in the foregoing are true
Subscribed and sworn to me this day of	, 20	
My Commission expires:		
	Notary Public –Signature	
	Notary Public - Printed	