

CITY OF MICHIGAN CITY, INDIANA

100 E. Michigan Blvd. Michigan City, IN 46360
(219) 873-1415 – fax (219) 873-1580

**CLASS 2 STRUCTURE
APPLICATION FOR COMBINED BUILDING PERMIT AND
IMPROVEMENT LOCATION PERMIT**

DATE OF APPLICATION _____ JOB NAME _____

ADDRESS _____

HISTORIC DISTRICTS Washington St. District Franklin St. District Elston Grove District

If your property is located in a Historic District, a "Certificate of Appropriateness" **must** be obtained for any exterior work before a building permit application can be processed.

Submitted Plans include: Lightweight Roof Trusses
 Lightweight I joists Second Floor Lightweight I joists First Floor
I, _____ (printed name) verify that the information provided is true and correct to the best of my knowledge. _____

PLANS REQUIRED: SITE PLANS - CONSTRUCTION PLANS

Site Plan - Floor plans – Section Dwg. – Structural Dwg. – Electrical Dwg. - Mechanical Dwg. – Plumbing Dwg. – Truss Specifications – Energy Conservation Study (REScheck)

Description of work: New Residence Residential Addition Residential Remodel

Pole Construction New Porch/Deck/Balcony Addition to Porch/Deck/Balcony

Rebuild Porch/Deck/Balcony Garage/Storage Building Swimming Pool

Description of other work : _____

A BUILDING PERMIT DOES NOT INCLUDE ELECTRICAL, MECHANICAL AND/OR PLUMBING WORK. (Separate permits are required for each.)

**** Important Note ** Energy Conservation Study (REScheck) Must be submitted for:**
• New Residence • Residential Addition • Residential Remodel • Pole Construction

OWNER'S INFORMATION:

Owner's Name _____

Owner's Mailing Address _____

Owner's Telephone # _____

Estimated Cost of Construction: _____

CONTRACTOR INFORMATION:

Contractor's Name _____

Contractor's Company Name _____

Contractor's Registration No. _____

Contractor's Address _____

Contractor's Telephone # _____

Contractor's Email _____

SEPARATE PERMITS to be obtained for the following:

Electrical work to be done by: _____

HVAC work to be done by: _____

Plumbing work to be done by: _____

Sewer work (if applicable) to be done by: _____

The applicant affirms that said building when construction is completed will be as herein described and further, that construction has not started as of this date.

Please note that City setback requirements are minimum requirements. Individual covenants or deed restrictions may contain requirements that are more restrictive.

SIGNED: _____
Applicant

DEPARTMENT APPROVALS

Zoning District _____

Flood Plain _____

Historic District _____

Sanitary Official _____

Date _____

Zoning Administrator _____

Date _____

Building Official _____

Date _____

PERMIT FEE _____

PERMIT # _____

CASH – CHECK # _____

ISSUE DATE _____

RECEIPT # _____

RECEIVED BY _____