

HARRISON COUNTY PLAN COMMISSION
IMPROVEMENT LOCATION PERMIT APPLICATION

PROPERTY OWNERS NAME _____ PHONE _____

and
CURRENT ADDRESS _____ City, Zip _____

CURRENT USE OF SITE LOCATION TO BUILD (circle one) Vacant/Single Family Dwelling/
Modular/Mobile Home/Garage/Storage Building/Commercial (State Release # _____)

DIRECTIONS TO PROPERTY _____

Name of person living on property _____ Relationship to owner if applicable _____

FILL IN REST OF APPLICATION THAT PERTAINS TO THE REASON FOR PERMIT:

REASON FOR PERMIT _____ BUILDING SIZE _____

COST/APPRaised VALUE _____ NUMBER OF BEDROOMS _____

TYPE OF EXTERIOR _____ BASEMENT(circle) Yes/No Is it (circle): Finished/Unfinished

General Contractor _____ Electrician _____ Plumber _____
Phone _____ Phone _____ Phone _____

PERMIT CHECKLIST- each item must be completed.(electric permits are exempt)

____ copy of current Health Department Permit (septic for new home or 90 day for existing homes) # _____

____ copy of recorded contract or deed (Can get from recorders office).

____ copy of driveway permit (not required for additions or existing State Hwy)

____ copy of site plan.(see reverse side; need setbacks for front, sides, rear of property & driveway location)

____ copy of building plans (foundation& tie down plan for manufactured & MH). Year of MH date _____

____ copy of town permit if location is within 2 mile fringe (City Limits). Town Hall Permit# _____

Has a variance or special exception ever been applied for or approved for this property __yes__ no.

If yes please describe _____

I agree that, if granted a permit for the above described building at the location designated in the County of Harrison, I will observe and comply with all laws, ordinances, and regulations affecting the use of the land including the Zoning Ordinance and all Ordinances amendatory thereof and supplement thereof now in force in the County of Harrison and consent to inspection of the premises for which the permit is granted, during and upon completion of construction authorized. It is further agreed that upon a determination that the work performed under this permit does not comply with the approved site plan, I will take corrective action, including demolition if necessary, to insure the site improvements comply with all minimum setback requirements. If a Certificate of Occupancy is required the request must be made within 10 days after final inspection has been passed and before occupation of the dwelling.

SIGNATURE OF OWNER OR REPRESENTATIVE

Date

FOR OFFICE USE ONLY

Subject to all conditions stated above by the applicant and any conditions required by the Plan Commission staff,

Administrator/Planner _____ Date _____ Fee _____

Flood Plain Yes/No (Circle) Comments _____

Construction plans approved by _____ setbacks F _____ S _____ R _____

PARCEL ID TOWNSHIP _____ SECTION _____ TWP _____ RANGE _____ PARCEL _____

Project address _____

RECEIPT # _____ DATE _____ PERMIT# _____