

office (260) 724-3814
fax (260) 724-9104
email sbraun@decaturin.org

Building Department
172 N 2nd St
Decatur IN 46733

Permit # _____
Date _____

24 HOUR NOTICE REQUIRED FOR ALL INSPECTIONS

PROJECT ADDRESS _____

SUBDIVISION _____ LOT _____

APPLICANT NAME _____ PHONE _____

EMAIL _____ CELL PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

OWNER _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

GENERAL CONTRACTOR _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

FLOOD PLAIN DESIGNATION? (YES/NO) _____ **ALL CONSTRUCTION ADJACENT TO OR WITHIN THE FLOOD PLANE MUST INCLUDE A SURVEYOR'S ELEVATION CERTIFICATE.**

PROPOSED WORK: NEW CONSTRUCTION ADDITION REMODEL OTHER

DESCRIBE _____

ESTIMATED COST OF PROJECT _____

TOTAL SQUARE FOOTAGE _____

FOUNDATION SIZE (DEPTH X WIDTH) _____ MATERIALS _____

PLEASE ATTACH A DETAILED SITE PLAN. YOUR DRAWING MUST INCLUDE:

- ALL PROPERTY LINES, WITH DIMENSIONS, DRIVEWAYS, ROADS, ACCESS EASEMENTS THAT BORDER OR RUN THROUGH THE PROPERTY,
- ALL STRUCTURES ON THE PROPERTY THAT CURRENTLY EXIST OR ARE PROPOSED
- SHOW ALL DISTANCES FROM THE NEW AND EXISTING STRUCTURES TO ALL PROPERTY LINES -- FRONT, REAR, AND SIDES

NEW CONSTRUCTION :

- BUILDING ELEVATIONS
- FULL SET OF PRINTS, INCLUDING FOUNDATION AND ELECTRIC
- WINDOW SIZES, MANUFACTURER AND SERIES
- TRUSSES MUST INCLUDE ENGINEER STATEMENT OF COMPLIANCE

ALL CHANGES AFTER PERMIT IS ISSUED MUST BE RESUBMITTED FOR APPROVAL.

SIGNATURE _____ DATE _____

APPLICANT HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) I AM AUTHORIZED TO MAKE THE APPLICATION. (2) I HAVE READ THIS APPLICATION AND ATTEST THAT THE INFORMATION WHICH HAS BEEN FURNISHED INCLUDING THAT CONTAINED IN THE PLANS IS CORRECT (3) THE PLANS WHICH HAVE BEEN FURNISHED TO CITY OF DECATUR ARE A BASIS UPON WHICH CITY OF DECATUR IS ENTITLED TO ACT IN ISSUING OR REVOKING ANY PERMIT OR CERTIFICATE OF COMPLIANCE. (4) IF THERE IS ANY MISREPRESENTATION IN THIS APPLICATION, OR ANY ASSOCIATED DOCUMENTS, THE CITY OF DECATUR MAY REVOKE ANY PERMIT OF CERTIFICATE OF OCCUPANCY ISSUED BASED UPON THIS MISINFORMATION. (5) I AGREE TO COMPLY WITH ALL CITY OF DECATUR ORDINANCES, PERMIT CONDITIONS AND STATE STATUTES WHICH REGULATE BUILDING CONSTRUCTION, USE, OCCUPANCY AND SITE DEVELOPMENT. (6) I GRANT AND WILL REQUEST THE CITY OF DECATUR OFFICIALS TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

THE PERMIT IS NOT VALID & WORK IS NOT PERMITTED UNTIL SIGNED AND ISSUED BY THE AGENT OF BUILDING/ZONING DEPT

SIGNED _____ PERMIT FEES: \$ _____

(building official)

Decatur Building and Zoning Department

172 N 2nd St

Decatur IN 46733

Tel (260) 724-3814



Curt Witte, Superintendent

Advanced Structural Component Notification

Effective July 1, 2018, applicants for structural permits are required to declare any “advanced structural components” used in the floor or roofing construction having less than one (1) hour of fire resistance when tested in accordance with ASTM Standard E119. Please provide the following information:

Address: _____

Type of Component: _____ **I-Joist** _____ **Roof Truss**

This structure has:

_____ **has “advanced structural components” in the floor.**

_____ **has “advanced structural components” in the roof.**

_____ **Does not have “advanced structural components”.**

Applicants Signature: _____

Date: _____

This information will be uploaded and stored in the electronic project file at the Decatur Building and Zoning Department. This information is used to protect first responders where the potential of compromised structural integrity is potentially present.