

THE CITY OF PERU INDIANA COMMERCIAL BUILDING AND ZONING PERMITS APPLICATION



OFFICIAL USE ONLY

ZONING # _____ BLDG # _____ DATE: _____

ZONING \$ _____ BLDG \$ _____ TOTAL \$ _____

PRIMARY PARCEL INFORMATION

PARCEL NO. _____ ZONING CLASSIFICATION _____

TOWNSHIP _____ SUB-DIVISION _____ LOT NO. _____

PARCEL SIZE: Length _____ X Width _____ = Total Sq. Ft. _____

SITE ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

FLOOD MAP NO. _____ FLOOD ZONE CLASSIFICATION _____

ASSOCIATED PARCELS INFORMATION

PARCEL NO. _____ ZONING CLASSIFICATION _____

TOWNSHIP _____ SUB-DIVISION _____ LOT NO. _____

PARCEL SIZE: Length _____ X Width _____ = Total Sq. Ft. _____

FLOOD MAP NO. _____ FLOOD ZONE CLASSIFICATION _____

PARCEL NO. _____ ZONING CLASSIFICATION _____

TOWNSHIP _____ SUB-DIVISION _____ LOT NO. _____

PARCEL SIZE: Length _____ X Width _____ = Total Sq. Ft. _____

FLOOD MAP NO. _____ FLOOD ZONE CLASSIFICATION _____

NOTE: ADDITIONAL ASSOCIATED PARCEL INFORMATION: PLEASE FILLOUT "ADDITIONAL ASSOSSIATED PARCEL FORM AND ATTACH TO APPLICATION.

PROPERTY OWNER'S CONTACT INFORMATION

LAST: _____ FIRST: _____ MI: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

1st PHONE: _____ 2nd PHONE: _____

EMAIL: _____

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TO BE COMPLETED BY APPLICANT

PROJECT INFORMATION

Approximate Starting Date: _____ Approximate Completion Date: _____

Estimated Project Cost \$ _____

SITE PLAN INFORMATION:

Front Setback from Right of Way: _____ ft. Left Side Setback from Right of Way: _____ ft.

Rear Setback from Right of Way: _____ ft. Right Side Setback from Right of Way: _____ ft.

Private Drive: Length _____ X Width _____ = _____ Total SF

Easement: Length _____ X Width _____ = _____ Total SF

Q. How many existing structures are on the "Primary and or Associated Parcel(s)". _____
Please provide the dimensions of each.

1. _____ Length _____ X Width _____ = _____ Total SF

2. _____ Length _____ X Width _____ = _____ Total SF

3. _____ Length _____ X Width _____ = _____ Total SF

Total Square Footage of All Structures = _____ SF

WATER SUPPLY AND SANITARY WASTE SYSTEMS

Q. What type of system do you have? Please circle all that apply.

Water: Municipal (City) Private (Well)

Sanitary: Municipal (City) Private (Septic tank and leach field)

City of Peru Utilities Tap Permit # _____ County Board of Health Permit # _____

In the following sections please answer the questions that best describe your project. For example... If you are building a new or renovating an existing apartment(s) the section "**Multi Family Structures**" will best describe your project. If you are working on any other type of commercial project then "**Commercial and Industrial Structures**" will be the section you will need to complete.

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PROJECT SCOPE

Commercial and Industrial Structures:

Please answer all the questions in this section that apply to your project and circle **all** applicable responses.

Q. What type of building is this project? Please circle all that apply.

Office Space	Retail Floor Space	Decks, Porches and Balcony's
Hospital	School	Auditorium
Entertainment	Salvage Yard	Swimming Pools and Spa
Manufacturing Facility		Warehouse or Storage Buildings

Q. What class of project is this? New Building Addition to an existing building

Q. What category of project will this be?

New Construction Rehabilitation Repair Demolition Other

Q. How will it be erected? Please circle all that apply.

Conventional Construction (Stick Built) Modular Construction Pre Engineered

Q. What are the mechanical aspects of this project?

Electrical Service:	New	Upgrade	Repairs
Electrical Systems:	New	Upgrade	Repairs
HVAC Systems:	New	Upgrade	Repairs
Plumbing Systems:	New	Upgrade	Repairs
Fire Suppression Systems:	New	Upgrade	Repairs

Q. Will this project require excavation? Yes No

Area to be excavated : Length _____ X Width _____ = _____ Total SF

Q. Will this project require a driveway, curb, alley, or street cut? Yes No

Driveway: Length _____ X Width _____ = _____ Total SF

Cut: Length _____ X Width _____ = _____ Total SF

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PROJECT SCOPE

Multi Family Structures:

Please answer all the questions in this section that apply to your project and circle **all** applicable responses.

Q. What type of project is this? New Building Addition to an existing building

Q. What class of project is this? Apartments Condominiums

Q. Is this a rental property? Yes No Q. How many units? _____ Units

Q. What category of project will this be?

New Construction Rehabilitation Repair Demolition Other

Q. How will it be erected? Please circle all that apply.

Conventional Construction (Stick Built) Modular Construction Pre Engineered

Q. What are the dimensions of the structure(s) you are adding or taking away from this parcel?

1. _____ Length _____ X Width _____ = _____ Total SF

2. _____ Length _____ X Width _____ = _____ Total SF

Total Square Footage of All Structures = _____ SF

Q. What are the mechanical aspects of this project?

Electrical Service: New Upgrade Repairs

Electrical Systems: New Upgrade Repairs

HVAC Systems: New Upgrade Repairs

Plumbing Systems: New Upgrade Repairs

Fire Suppression Systems: New Upgrade Repairs

Q. Will this project require excavation? Yes No

Area to be excavated : Length _____ X Width _____ = _____ Total SF

Q. Will this project require a driveway, curb, alley, or street cut? Yes No

Driveway: Length _____ X Width _____ = _____ Total SF

Cut: Length _____ X Width _____ = _____ Total SF

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TO BE COMPLETED BY APPLICANT. CIRCLE THE APPROPRIATE DESIGNATION OF RESPONSIBILITY OF EACH CONTRACTOR.

CONTRACTOR INFORMATION

GENERAL

Name _____ Registration # _____ Prime Sub

EXCAVATION

Name _____ Registration # _____ Prime Sub

CONCRETE

Name _____ Registration # _____ Prime Sub

CARPENTRY

Name _____ Registration # _____ Prime Sub

MASONRY

Name _____ Registration # _____ Prime Sub

ELECTRICAL

Name _____ Registration # _____ Prime Sub

PLUMBING

Name _____ Registration # _____ Prime Sub

HVAC

Name _____ Registration # _____ Prime Sub

ROOFING

Name _____ Registration # _____ Prime Sub

GUTTERS

Name _____ Registration # _____ Prime Sub

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TO BE COMPLETED BY APPLICANT. CIRCLE THE APPROPRIATE DESIGNATION OF RESPONSIBILITY OF EACH CONTRACTOR.

CONTRACTOR INFORMATION

SIDING

Name _____ Registration # _____ Prime Sub

WINDOWS

Name _____ Registration # _____ Prime Sub

INSULATION

Name _____ Registration # _____ Prime Sub

DRYWALL

Name _____ Registration # _____ Prime Sub

PAINTING

Name _____ Registration # _____ Prime Sub

WALLPAPER

Name _____ Registration # _____ Prime Sub

CABINETS

Name _____ Registration # _____ Prime Sub

TRIM

Name _____ Registration # _____ Prime Sub

OTHER

Name _____ Registration # _____ Prime Sub

Other: _____

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Other Supporting Documents

NOT ALL ITEMS BELOW WILL APPLY TO YOUR PROJECT. PLEASE REVIEW AND PROVIDE ALL APPLICABLE DOCUMENTS TO THE BUILDING AND ZONING DEPARTMENT. RELEASE OF ALL LOCAL PERMITS ARE DEPENDANT UPON THESE DOCUMENTS.

IF YOU ARE UNCERTIAN AS TO WHICH DOCUMENTS APPLY TO YOUR PROJECT PLEASE FEEL FREE TO CONTACT OUR OFFICE FOR ASSISTANCE.

State Design Release:

675 IAC 12-6-3 Sec. 3 (a) No construction shall be done on a Class 1 structure until a design release has been issued by the office of the state building commissioner unless it is of a type specifically exempt ... 675 IAC 12-6-4.

For forms and information concerning your project and the need for a design release please go to: <http://www.in.gov/dhs/fire/branches/plan%20review/index.html> or check with the City of Peru Building and Zoning Department 473-4881 or our web site <http://www.cityofperu.org/Building%20&%20Zoning.htm>

Q. Have you received your State Design Releases? Yes No N/A

Flood Plain:

Projects located in designated flood plains are required to provide application and plans before constructing or reconstructing of any structures in these areas. If you are located in a designated flood plain you are required to provide all project information to the "Indiana Department of Natural Resources" as well as the local building and zoning departments.

Q. Do you have your DNR permits and or approvals? Yes No N/A

Q. Do you have your Certificate of Elevation? Yes No N/A

Certificate No. _____

Erosion Control:

An Erosion Control Plan is required for projects covering 10,000 SF or more (Local). Some examples of control elements for example... silt fences, soil clean up on the streets and allies temporary gravel construction entrance ect...

If your project covers 1 acre or more compliance with State Rule 5 is required. An NOI (Notice of Intent) to disturb the ground must be filed with the "Indiana Soil and Water Conservation District". For more information and the forms needed please contact Mr. Jamin Biseagal 473-7651

Q. Is your erosion plan included with your plans? Yes No N/A

Local Plan Review:

Q. Have you submitted all your approved plans and supporting documents for local review?

Yes No N/A

Miami County Health Department:

If your completed project handles food you will need to see the Miami County Health Department and provide for them your supporting documents. Information is available by calling Carol Biddle at (765) 473-0284 or visiting their web site

<http://miamicountyin.gov/Departments/Health/EnvironmentalHealth/FoodResources.htm>

If your project is on a private sanitary and or waste system (private well) you will need to contact the Miami County Health Department for applications and permits. Ken Scott (765) 473-0283 or the web

<http://miamicountyin.gov/Departments/Health/EnvironmentalHealth/HealthResources.htm>

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TO READ AND SIGNED BY APPLICANT

DISCLOSURE STATEMENTS

The property owner and or his or her agent hereby attest to and concur with the following:

1. I am authorized to make this application.
2. I have read this application and confirm that to the best of my knowledge all information submitted is correct.
3. The plans submitted, for this project, are a basis upon which the City of Peru's Building and Zoning Department is entitled to act in issuing or revoking any Permits and or Certificates.
4. If any misrepresentation in the application or any associated documents is exposed, the City of Peru's Building and Zoning Department may revoke any and all Permits and or Certificates issued.
5. I agree to comply with all applicable City of Peru Ordinances, State of Indiana Statutes, International Building Codes and Permit conditions which regulate building, construction, use, occupancy and site development.
6. I grant and request the City of Peru Building and Zoning Department, and its designates, the privilege to access the property designated in this application and conjoined to this project for the purposes of inspecting the work permitted and posting notices for the same.
7. I shall procure and retain the required Certificate of Occupancy in my records upon completion of the project for perpetuity.

NOTE: Plans shall mean all site and construction plans as well as all specifications.

This permit is not valid and work is not permitted until signed and issued by an agent of the City of Peru Department of Building Safety.

SIGNATURES

PROPERTY OWNER OR AGENT

DATE

DEPARTMENT OF BUILDING SAFETY AGENT

DATE