

ZONING REVIEW (If applicable-to be completed by office):

SETBACKS

| | | | | |
|---------------------|--------------------|--------------------|--------------------|------------|
| FRONT LOT LINE (FT) | SIDE LOT LINE (FT) | SIDE LOT LINE (FT) | REAR LOT LINE (Ft) | OTHER (FT) |
|---------------------|--------------------|--------------------|--------------------|------------|

| | | |
|--------------------------|------------------------------|-----------------------------|
| SETBACK VARIANCE NEEDED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|--------------------------|------------------------------|-----------------------------|

*Notes from Admin:

| | | |
|-----------------------|------------------------------|-----------------------------|
| NEW ADDRESS REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|-----------------------|------------------------------|-----------------------------|

*Notes from Admin:

| | | |
|-----------------------------|------------------------------|-----------------------------|
| COMBINING OF LOTS REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|-----------------------------|------------------------------|-----------------------------|

Parcel #: _____

Parcel #: _____

*Notes from Admin:

| | | |
|--------------------|------------------------------|-----------------------------|
| REZONING REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|--------------------|------------------------------|-----------------------------|

*Notes from Admin:

| | | |
|----------------------------|------------------------------|-----------------------------|
| FENCING VARIANCE REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|----------------------------|------------------------------|-----------------------------|

*Notes from Admin:

| | | |
|----------------------------|------------------------------|-----------------------------|
| PARKING VARIANCE REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|----------------------------|------------------------------|-----------------------------|

*Notes from Admin:

| | | |
|--------------------------|------------------------------|-----------------------------|
| OTHER VARIANCE REQUIRED? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|--------------------------|------------------------------|-----------------------------|

*Notes from Admin:

FLOODPLAIN

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.

If in a flood plain, you will need to apply with: DNR Permits/Approvals

Certificate of Elevation Cert No: _____

| | |
|--|---|
| REQUIRED <input type="checkbox"/> YES (Flood Zone: _____) <input type="checkbox"/> NO | <u>IF REQUIRED, DATE RECEIVED:</u> |
|--|---|

****Attach any documentation regarding this portion of the review.**

Notes from Admin:

PLANS APPROVED BY ZONING ADMINISTRATOR ON: _____

ZONING ADMINISTRATOR SIGNATURE: _____