



GENERAL BUILDING PERMIT

Department of Building, Planning, & Development

210 S Cedar St PO Box 506 Auburn IN 46706 | 260.925.6449 | 260.920.3342 fax | bpd@ci.auburn.in.us

APPLICANT/PROPERTY OWNER INFORMATION

Applicant	Name	
	Address	
	Phone / Email	
Property Owner Same as applicant <input type="checkbox"/> Y <input type="checkbox"/> N	Name	
	Address	
	Phone / Email	

PROJECT LOCATION

Address	
Subdivision, Lot	

PROJECT INFORMATION

Project Contractor								
Site/Project Mgr Name & Contact Info								
Project Description <i>(include foundation type; number of beds/baths; and garage size)</i>								
Project Details	New Building			Addition		Remodel Interior/Exterior		
	Construction Type:							
	Occupancy Class:							
	Stories in Building:			Phased Project:			Yes	No
	Basement: Yes No		Building Sprinklered: Yes No			Fire Alarm Provided: Yes No		
	Electrical Yes No		Plumbing Yes No			Heating/Air Yes No		
Fire Sprinklers Yes No		Fire Alarm Yes No			Hood System Yes No			
Size of Building (sq. ft.)								
Size of Project (sq. ft.)								
Use of ASC <i>Will the project include Advanced Structural Components?</i>		Yes-Roof		Yes-Floor		No ASC		
Plot Plan Attached <i>(include driveway surface material; sidewalk; and landscaping)</i>		Yes		No				



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Elevations Attached <i>(include structure height at tallest peak and eave depth)</i>	Yes	No
Floorplans Attached <i>(include location of electric service)</i>	Yes	No
Estimated Start Date		Est. Completion Date
Cost of Project	\$	
Sanitary Sewer Connection	Existing	New
Water Connection <i>(include tap and meter size, if applicable)</i>	Existing New-Tap Size:	Fire Suppression New-Meter Size:
Does your project need a State Design Release?	Yes Release #: _____	Projects need a State Design Release, if any of following apply: <ul style="list-style-type: none"> ▪ Open to Public ▪ 3 or more tenants ▪ 1 or more employees with access ▪ Or other criteria outlined in Indiana Code §22-12-1-4

Contact Indiana 811 at least two full working days before starting their project – It is the law!

Call 811 or 1-800-382-5544 or visit www.indiana811.org.

APPLICANT SIGNATURE

Property Owner/Applicant acknowledges this application has been reviewed to ensure compliance with the City of Auburn's Unified Development Ordinance. The issuance of the permit does not mean this project meets the criteria of private land restrictions (covenants, deed restrictions etc.). The Property Owner/Applicant is responsible for ensuring the project satisfies any private land restrictions criteria and obtains association/architectural committee approval as necessary. (Property Owner/Applicant Initials)

I, the owner or authorized applicant of the owner of record, agree that any construction, reconstruction, enlargement, relocation, or alteration of a structure, or any change in the use of land or structures requested by this application will comply with, and conform to, all applicable laws of the State of Indiana and the Unified Development Ordinance of Auburn Indiana. The information provided in this application is true and accurate to the best of my knowledge.

****Pursuant to Ordinance No. 2022-23, all fees are non-refundable regardless of whether the permit is or is not used by the applicant. All fees are non-refundable regardless of the reason for said request.**

Signature of Applicant/Authorized Representative

Printed Name

Date

Signature of Owner

Printed Name

Date

Rec'd By/Date		Site-Built		\$	Foundation		\$
Zoning/Overlay		Remodel		\$	Swimming Pool		\$
Flood District	No FW FF	Addition		\$	Deck/Porch		\$
Plng Approval/Date		Sewer Tap		\$	Fire Suppression		\$
Bldg Approval/Date		Sewer Connection		\$	Special Assess/MS4		\$
CDR #		Water Tap		\$	Sys Dev Charge		\$
Total Fees	\$	Water Meter		\$	Other		\$
Receipt #							
Issued By/Date							