

# STRUCTURAL PERMIT APPLICATION

|   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
|---|--|-------------------------------------|---|---|--|---|---------------------------------|--|-------------------------------------|--------------------------------------|-------------------------------------|-----------------------------------|--|----------------------------------|---|---|--|--|---|--------------------------------------|--|---|--|---|---|---------------------------------------|--|---|---------------------------------------|---|---|-------------------------------------|---|---|--|---|---|--|-----------------------------------|---|--|---|---|--|---|-------------------------------------|---|--|--------------------------------------|---|--|--|---|--|---|---|--|--|----------------------------------|
| <b>PERMIT NUMBER</b> STR <u>06-11301</u><br>If phoned or faxed in, payment must be received in 5 business days  |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>A. ADDRESS:</b> <u>3357 N. Broadway</u><br>NUMBER N-S-E-W STREET NAME SUITE/BLD#<br><br>IF THIS BUILDING HAS MULTIPLE ADDRESSES:<br>LOWEST NUMBER _____ HIGHEST NUMBER _____   | <b>P. USE OF STRUCTURE:</b><br><br><table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> 1) ANTENNA</td> <td><input type="checkbox"/> 2) APT CLUBHOUSE</td> </tr> <tr> <td><input type="checkbox"/> 3) APT GAR/CARPORT</td> <td><input type="checkbox"/> 4) APT OFFICE</td> </tr> <tr> <td><input type="checkbox"/> 5) ASSISTED LIVING</td> <td><input type="checkbox"/> 6) ATM</td> </tr> <tr> <td><input type="checkbox"/> 7) BAR / TAVERN</td> <td><input type="checkbox"/> 8) CARWASH</td> </tr> <tr> <td><input type="checkbox"/> 9) CEMETERY</td> <td><input type="checkbox"/> 10) CHURCH</td> </tr> <tr> <td><input type="checkbox"/> 11) CLUB</td> <td><input type="checkbox"/> 12) COLTS CMLPX</td> </tr> <tr> <td><input type="checkbox"/> 13) CEV</td> <td><input type="checkbox"/> 14) COMM TOWER</td> </tr> <tr> <td><input type="checkbox"/> 15) CONCRETE PLANT</td> <td><input type="checkbox"/> 16) CONDOMINIUM</td> </tr> <tr> <td><input type="checkbox"/> 17) CONVENIENCE STORE</td> <td><input 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COMMERCIAL</td> <td><input type="checkbox"/> 36) OTHER INDUST</td> </tr> <tr> <td><input type="checkbox"/> 37) OTHER SPECIAL USE</td> <td><input type="checkbox"/> 38) PARK</td> </tr> <tr> <td><input type="checkbox"/> 39) PARKING GARAGE</td> <td><input type="checkbox"/> 40) PARSONAGE</td> </tr> <tr> <td><input type="checkbox"/> 41) PROFESSIONAL SRV</td> <td><input type="checkbox"/> 42) PERSONAL SRV</td> </tr> <tr> <td><input type="checkbox"/> 43) REC / AMUSMNT</td> <td><input type="checkbox"/> 44) RETAIL SALES</td> </tr> <tr> <td><input type="checkbox"/> 45) SCHOOL</td> <td><input type="checkbox"/> 46) SELF STORAGE</td> </tr> <tr> <td><input type="checkbox"/> 47) SHOPPING CENTER</td> <td><input type="checkbox"/> 48) STADIUM</td> </tr> <tr> <td><input type="checkbox"/> 49) STORAGE TANK</td> <td><input type="checkbox"/> 50) TEMP CNST TRL</td> </tr> <tr> <td><input type="checkbox"/> 51) TRAINING FACILITY</td> <td><input type="checkbox"/> 52) TRNSP FACILITY</td> </tr> <tr> <td><input type="checkbox"/> 53) 2 FAMILY DWELLING</td> <td><input type="checkbox"/> 54) UNIVERSITY</td> </tr> <tr> <td><input type="checkbox"/> 55) VEHICLE SALES/SRVS</td> <td><input type="checkbox"/> 56) WAREHOUSE</td> </tr> <tr> <td><input type="checkbox"/> 57) WHOLESALE</td> <td><input type="checkbox"/> 58) ZOO</td> </tr> </table> | <input type="checkbox"/> 1) ANTENNA | <input type="checkbox"/> 2) APT CLUBHOUSE | <input type="checkbox"/> 3) APT GAR/CARPORT | <input type="checkbox"/> 4) APT OFFICE | <input type="checkbox"/> 5) ASSISTED LIVING | <input type="checkbox"/> 6) ATM | <input type="checkbox"/> 7) BAR / TAVERN | <input type="checkbox"/> 8) CARWASH | <input type="checkbox"/> 9) CEMETERY | <input type="checkbox"/> 10) CHURCH | <input type="checkbox"/> 11) CLUB | <input type="checkbox"/> 12) COLTS CMLPX | <input type="checkbox"/> 13) CEV | <input type="checkbox"/> 14) COMM TOWER | <input type="checkbox"/> 15) CONCRETE PLANT | <input type="checkbox"/> 16) CONDOMINIUM | <input type="checkbox"/> 17) CONVENIENCE STORE | <input type="checkbox"/> 18) CONVENTN CTR | <input type="checkbox"/> 19) DAYCARE | <input type="checkbox"/> 20) DISTRIBTN CTR | <input type="checkbox"/> 21) FIRE STATION | <input type="checkbox"/> 22) FOOD SERVICES | <input type="checkbox"/> 23) GREENHOUSE | <input type="checkbox"/> 24) REMEDTN BLDG | <input type="checkbox"/> 25) HOSPITAL | <input type="checkbox"/> 26) HOTEL/MOTEL | <input type="checkbox"/> 27) LIFT STATION | <input type="checkbox"/> 28) MANUFACT | <input type="checkbox"/> 29) MEDICAL CARE | <input type="checkbox"/> 30) MULTI-FAMILY | <input type="checkbox"/> 31) OFFICE | <input type="checkbox"/> 32) OFFICE TRAILER | <input checked="" type="checkbox"/> 33) ONE FAMILY DWELLING | <input type="checkbox"/> 34) ORPHANAGE | <input type="checkbox"/> 35) OTHER COMMERCIAL | <input type="checkbox"/> 36) OTHER INDUST | <input type="checkbox"/> 37) OTHER SPECIAL USE | <input type="checkbox"/> 38) PARK | <input type="checkbox"/> 39) PARKING GARAGE | <input type="checkbox"/> 40) PARSONAGE | <input type="checkbox"/> 41) PROFESSIONAL SRV | <input type="checkbox"/> 42) PERSONAL SRV | <input type="checkbox"/> 43) REC / AMUSMNT | <input type="checkbox"/> 44) RETAIL SALES | <input type="checkbox"/> 45) SCHOOL | <input type="checkbox"/> 46) SELF STORAGE | <input type="checkbox"/> 47) SHOPPING CENTER | <input type="checkbox"/> 48) STADIUM | <input type="checkbox"/> 49) STORAGE TANK | <input type="checkbox"/> 50) TEMP CNST TRL | <input type="checkbox"/> 51) TRAINING FACILITY | <input type="checkbox"/> 52) TRNSP FACILITY | <input type="checkbox"/> 53) 2 FAMILY DWELLING | <input type="checkbox"/> 54) UNIVERSITY | <input type="checkbox"/> 55) VEHICLE SALES/SRVS | <input type="checkbox"/> 56) WAREHOUSE | <input type="checkbox"/> 57) WHOLESALE | <input type="checkbox"/> 58) ZOO |
| <input type="checkbox"/> 1) ANTENNA   | <input type="checkbox"/> 2) APT CLUBHOUSE  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 3) APT GAR/CARPORT   | <input type="checkbox"/> 4) APT OFFICE   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 5) ASSISTED LIVING   | <input type="checkbox"/> 6) ATM  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 7) BAR / TAVERN  | <input type="checkbox"/> 8) CARWASH  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 9) CEMETERY  | <input type="checkbox"/> 10) CHURCH  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 11) CLUB   | <input type="checkbox"/> 12) COLTS CMLPX   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 13) CEV  | <input type="checkbox"/> 14) COMM TOWER  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 15) CONCRETE PLANT   | <input type="checkbox"/> 16) CONDOMINIUM   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 17) CONVENIENCE STORE  | <input type="checkbox"/> 18) CONVENTN CTR  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 19) DAYCARE  | <input type="checkbox"/> 20) DISTRIBTN CTR   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 21) FIRE STATION   | <input type="checkbox"/> 22) FOOD SERVICES   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 23) GREENHOUSE   | <input type="checkbox"/> 24) REMEDTN BLDG  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 25) HOSPITAL   | <input type="checkbox"/> 26) HOTEL/MOTEL   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 27) LIFT STATION   | <input type="checkbox"/> 28) MANUFACT  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 29) MEDICAL CARE   | <input type="checkbox"/> 30) MULTI-FAMILY  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 31) OFFICE   | <input type="checkbox"/> 32) OFFICE TRAILER  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input checked="" type="checkbox"/> 33) ONE FAMILY DWELLING   | <input type="checkbox"/> 34) ORPHANAGE   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 35) OTHER COMMERCIAL   | <input type="checkbox"/> 36) OTHER INDUST  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 37) OTHER SPECIAL USE  | <input type="checkbox"/> 38) PARK  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 39) PARKING GARAGE   | <input type="checkbox"/> 40) PARSONAGE   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 41) PROFESSIONAL SRV   | <input type="checkbox"/> 42) PERSONAL SRV  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 43) REC / AMUSMNT  | <input type="checkbox"/> 44) RETAIL SALES  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 45) SCHOOL   | <input type="checkbox"/> 46) SELF STORAGE  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 47) SHOPPING CENTER  | <input type="checkbox"/> 48) STADIUM   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 49) STORAGE TANK   | <input type="checkbox"/> 50) TEMP CNST TRL   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 51) TRAINING FACILITY  | <input type="checkbox"/> 52) TRNSP FACILITY  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 53) 2 FAMILY DWELLING  | <input type="checkbox"/> 54) UNIVERSITY  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 55) VEHICLE SALES/SRVS   | <input type="checkbox"/> 56) WAREHOUSE   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <input type="checkbox"/> 57) WHOLESALE  | <input type="checkbox"/> 58) ZOO   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>B. OWNER OR LEASEE OF THE PROPERTY:</b><br>NAME <u>Robert Hoffman</u><br>ADDRESS <u>3357 N. Broadway</u><br>NUMBER N-S-E-W STREET NAME<br><u>Indpls IN</u><br>CITY STATE ZIP CODE<br>TELEPHONE NUMBER: <u>(317) 925-9253</u>   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>C. PERMIT TYPE:</b><br><input type="checkbox"/> 1) ADDITION AND REMODEL<br><input type="checkbox"/> 2) ADDITION <input type="checkbox"/> 3) FOUNDATION ONLY<br><input type="checkbox"/> 4) INT FINISH <input type="checkbox"/> 5) NEW ACC STR (COM)<br><input type="checkbox"/> 6) REMODEL <input type="checkbox"/> 7) NEW ACC STR (RES)<br><input checked="" type="checkbox"/> 8) OTHER RENOVATION: <u>Eye Paint windows</u><br><u>Replacement like for like</u><br><input type="checkbox"/> 9) NEW PRIMARY STR <input type="checkbox"/> 10) TENANT FN<br><input type="checkbox"/> 11) PLACEMENT EXST STR |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>D. EST VALUE OF CONST ACTIVITY:</b> <u>\$21000</u>   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>E. STATE DESIGN RELEASE NUMBER:</b> _____  |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>F. EXISTING GROSS FLOOR AREA:</b> <u>1,700</u>   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>G. ADDITIONAL GROSS FLOOR AREA:</b> <u>N/A</u>   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>H. NUMBER OF STORIES:</b> <u>2</u>   |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>I. LOAD CONSTRUCTION TYPE:</b><br><input type="checkbox"/> 1) CONCRETE <input type="checkbox"/> 2) ENGINEERED<br><input type="checkbox"/> 3) MASONRY <input type="checkbox"/> 4) POST & BEAM<br><input type="checkbox"/> 5) STEEL <input checked="" type="checkbox"/> 6) WOOD FRAME  |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>J. TYPE OF STRUCTURE:</b><br><input type="checkbox"/> 1) ACCESSORY <input type="checkbox"/> 2) DETACHED GARAGE<br><input type="checkbox"/> 3) OTHER: _____<br><input checked="" type="checkbox"/> 4) PRINCIPAL <input type="checkbox"/> 5) STORAGE BUILDING<br><input type="checkbox"/> 6) POOL: _____<br>(POOLS ONLY) Fence / Safety Cover Installer  |  |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>K. PROPOSED OCC:</b> <u>—</u>  | <b>L. CONST TYPE:</b> <u>—</u>   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>M. EXIST ZONING:</b> <u>D5</u>   | <b>N. OF UNITS:</b> <u>1</u>   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |
| <b>O. FOUNDATION TYPE</b> <u>existing</u>   | <b>Q. CONTRACTOR / APPLICANT INFORMATION:</b><br><br>IF A CONTRACTOR HAS BEEN OR WILL BE HIRED TO DO THE WORK FOR WHICH THIS PERMIT IS REQUESTED, HE / SHE MUST BE LISTED IN MARION COUNTY AND MUST COMPLETE AND SIGN THIS SECTION:<br><br>BUSINESS NAME: <u>S AND M Const</u><br>(AS IT APPEARS ON CONTRACTOR'S ID CARD)<br><br>LISTING NUMBER C <u>6729801</u><br><br>I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT THE FOREGOING REPRESENTATIONS ARE TRUE<br><br>YOUR NAME (PRINT) <u>Sam Marji</u><br>SIGNATURE <u>[Signature]</u> DATE: _____<br>SIGNATURE OF CONTRACTOR OR APPLICANT<br>BUSINESS PHONE ( ) _____ FAX ( ) _____   |                                     |   |   |  |   |                                 |  |                                     |                                      |                                     |                                   |  |                                  |   |   |  |  |   |                                      |  |   |  |   |   |                                       |  |   |                                       |   |   |                                     |   |   |  |   |   |  |                                   |   |  |   |   |  |   |                                     |   |  |                                      |   |  |  |   |  |   |   |  |  |                                  |

center type

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