TO BE COMPLETED BY BUILDING DEPARTMENT PERSONNEL

APPLICATION NO._____ RENTAL PROPERTY: □REGISTERED □PENDING □N/A
OWNER NO. _____ Deed_____ Yes/No

CONTRACTOR _____ Ins_____ Wkmans Comp _____ Bond _____

BUILDING PERMIT APPLICATION

Division of Inspections & Permits/Code Enforcement
4525 Indianapolis Blvd, East Chicago, In 46312
(219) 391-8294/Fax: 391-7013

Important – Applicant to complete all items in Sections I, II, III

I. PROPERTY ADDRES

II. TYPE AND COST OF BUILDING – All applicants complete parts A-D

A. TYPE OF IMPROVEMENT

1 ☐ New building

2 ☐ Addition (If residential, enter number of new housing units added, if any, in Part D, 13)

3 ☐ Alteration (See 2 above)

4 ☐ Repair, replacement

5 ☐ Wrecking (If multifamily residential, enter number of units in building in Part D, 13)

6 ☐ Moving (Relocation)

7 ☐ Foundation only

B. **OWNERSHIP**

8. ☐ Private (Individual, corporation, nonprofit institution, etc)

9. ☐ Public (Federal, State, or local government)

C. **COST**

10. Cost of Improvement……$_____
To be installed but not included in above cost

a. Electrical……_____

b. Plumbing……_____

c. Heating, Air Conditioning……_____

d. Other (Elevator, etc.)……_____

11. **TOTAL COST OF IMPROVEMENT**

D. **PROPOSED USE – For "Wrecking" most recent use**

Residential
Is property used as rental property: ☐Yes ☐ No

12.X ☐ One family
13. ☐ Two or more family – Enter number of units…_____
14. ☐ Total floors _____
15. ☐ Transient hotel, motel, or dormitory
Enter number of units……_____
16. ☐ Garage
17. ☐ Carport
18. ☐ Other – Specify _____

_____

_____

Nonresidential

18. ☐ Amusement, recreational
19. ☐ Church, other religious
20. ☐ Industrial
21. ☐ Parking garage
22. ☐ Service station, repair garage
23. ☐ Hospital, institutional
24. ☐ Office, bank, professional
25. ☐ Public utility
26. ☐ School, library, other educational
27. ☐ Stores, mercantile
28. ☐ Tanks, towers
29. ☐ Other – Specify _____

_____

JOB DESCRIPTION (If use of existing building is being changed, enter proposed use and describe in detail):

Dumpster Permit . ☐ Yes . ☐ Not Required

811 DIG # **Note: The City is not part of 811. Please contact Engineering 219-391-8355 for locates.**

III. IDENTIFICATION – To be completed by all applicants

	Name	Mailing Address – Number, Street, City , State & Zip	Telephone
1 Owner or Lessee			
		Email Address:	
2. Contractor			
3. Architect or Engineer			

I, the owner or the owner's authorized agent, certify that the information on this form, the required plot plans, and on the required construction plans is complete and accurate. I will be responsible for all work allowed by permits granted under this form being in conformance with the information on the required plot plans, construction plans, this form and all applicable laws and ordinances. I agree to hold harmless and indemnify the City of East Chicago for any claim against the City as the result of any act of commission or omission by or on behalf of the undersigned, his/her agent, principal, contractor, subcontractor, materials man, or supplier.

Signature of Applicant	Date

Flood Zone **Yes**_____ **No** _____

FOR DEPARTMENT USE ONLY

IV. ZONING PLAN EXAMINER'S NOTES

NOTES:

V. VALIDATION

☐Building ☐Plumbing ☐HVAC ☐Electrical ☐Wrecking

Permit #_____

Date Issued_____

Fee $_____ Receipt No._____

☐ Fee Waived

Other Fee $_____

Plan Review $_____

Certificate of Occupancy $_____

Total Fee **$**_____

Approved By:

_____

_____ _____

Title Date

Rev: 11/21/2023 ***PLEASE COMPLETE APPLICATION IN ITS ENTIRETY***