

Office of the City Engineer
20 North 6th Street
Lafayette, Indiana 47901-1412
Phone 765-807-1050
permits@lafayette.in.gov
www.lafayette.in.gov



IMPROVEMENT LOCATION PERMIT APPLICATION

PROJECT # _____

OFFICE USE ONLY

PROJECT LOCATION: _____
ADDRESS OF CONSTRUCTION SITE LOT NUMBER SUBDIVISION

PROJECT NAME: _____

PROPERTY OWNER: _____

NAME

ADDRESS

CITY/STATE/ZIP

PHONE #

PROJECT CONTRACTOR:* _____

NAME

ADDRESS

CITY/STATE/ZIP

PHONE #

PROJECT CONTACT: _____

NAME

PHONE#

EMAIL

TYPE OF PRIMARY/ACCESSORY USE: Single Family Residence Multi-Family (No. of Units _____) Commercial

TYPE OF CONSTRUCTION: (for demolitions, including interior, please submit separate demolition application)

- | | |
|--|---|
| <input type="checkbox"/> New Structure | <input type="checkbox"/> Garage <input type="checkbox"/> Detached <input type="checkbox"/> Attached |
| <input type="checkbox"/> Tenant Build-Out | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Addition, Remodel or Repair | <input type="checkbox"/> Deck <input type="checkbox"/> Detached <input type="checkbox"/> Attached |
| (Existing driveway surface: <input type="checkbox"/> Hard <input type="checkbox"/> Gravel) | <input type="checkbox"/> Roof <input type="checkbox"/> No roof |
| (if gravel, must put in hard surface) | <input type="checkbox"/> Other _____ |

TOTAL VALUE OF PROJECT: _____

TOTAL SQ FT OF PROJECT: _____

DESCRIPTION OF WORK: _____

FEMA FLOOD ZONE: _____

LOT SQ FT: _____

LOT COVERAGE: _____%

PROPOSED BUILDING SETBACKS: Front _____ Side _____ / _____ Rear _____

Construction must begin within **120 days** of the issuance of an Improvement Location Permit. Construction is to be complete within **one year** of the issuance of an Improvement Location Permit unless a longer time is authorized by the Building Official. As owner or representative of the property for which this application is being filed, I hereby certify that the building and/or land will be used only for the address listed above, in accordance with the Unified Zoning Ordinance of Tippecanoe County. I further agree that this building (or portion thereof) authorized by this Improvement Location Permit will not be occupied until such time as any known code violations are corrected and until such time as a final inspection has been made and a Certificate of Occupancy has been issued. Sign permits require a separate form. **I certify that I am the owner, or legal agent of the owner, of the real estate subject to this application or I have been authorized by the owner, or legal agent of the owner, to submit this application (separate Letter of Consent required).**

PROPERTY OWNER/AGENT (PLEASE type or print) _____

PROPERTY OWNER/AGENT SIGNATURE _____

DATE _____

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OWNER AUTHORIZATION

**LETTER OF CONSENT
FROM PROPERTY OWNER/AGENT**

DATE: _____

To whom it may concern:

I _____, certify that I am the owner, or legal agent of the owner, of the real
Property Owner/Agent

estate described below, and give my consent to allow _____
Contractor/Person

to obtain and sign all necessary permits for improvements of:

Type of Improvement

Address of Project

Property Owner/Agent: _____
Printed Name Signature

Address

City, State, Zip

Phone/Email

Contractor/Person: _____
Printed Name Signature

Mark Gick
20 N. 6th Street
Lafayette, IN 47901



WEBSITE: www.lafayette.in.gov

Application#: _____
Building Commissioner
PHONE: 765.807.1050
permits@lafayette.in.gov

Senate Enrolled ACT No. 393: Fire Safety Notification

- Requirements: - Class 1 or 2 Structure
- Permits issued after 8/31/2018
- Reporting use of Advanced Structural Components (Lightweight I-joist or roof trusses)

City of Lafayette, Indiana

New Structure 393

Street Address: _____

Township:

Fairfield Perry Sheffield Wea

I do NOT have any Advanced Structural Components

Check ALL that apply:

- Lightweight I-joists, First Floor Lightweight I-joists, Second Floor
 Other (Please explain) Lightweight Roof Truss Floor Truss

Other: _____

I, _____ (printed name) verify the information provided is true and correct to the best of my knowledge.

Signature _____ Date _____

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Cover Check Sheet

For permit submittal questions, please visit our website at <http://lafayette.in.gov/2065/Building-Permits>

- Completed Application
- Owners Authorization (Deeded Property Owner)
- List of Contractors
- Form 393 (Fire Safety Notification)
- Correct Address & Parcel #
- Plans - Hard Copy (Full size set required for commercial projects)
- Plans - Electronic version (if plans are larger than 11" x 17")
- CDR – Commercial only - if applicable
- Bonds & Certificates of Insurance
- Licensed Electrician (Licensed with City of Lafayette) – if applicable
- Licensed Plumber (Licensed by the State of Indiana) – if applicable
- Site Plan
- Business Name – if Commercial Project
- Right of Way Application – if needed
- Utility Application – if needed