



TOWN OF
HEBRON

BRADFORD LADWIG
BUILDING COMMISSIONER
Office 219-996-4641
Fax 219-996-7494

ESTABLISHED 1890
BUILDING DEPARTMENT

EMAIL:
hebronbuilding@hebronindiana.org

107 N. Main Street | P.O. Box 478 | Hebron, Indiana 46341

MULTI-PURPOSE PERMIT APPLICATION

APPLICATION DATE _____ ESTIMATED COST \$ _____ DATE OF COMPLETION _____

PROPERTY LOCATION

SUBDIVISION _____

SITE ADDRESS _____

LOT NUMBER _____ PARCEL # _____ FLOOD ZONE YES NO

PROPERTY OWNER

NAME _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

HOME PHONE # _____ CELL # _____ WORK # _____

GENERAL CONTRACTOR

COMPANY NAME _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

WORK PHONE # _____ CELL # _____ HOME # _____

E-MAIL _____

COMPANY OWNER'S NAME _____

COMPANY OWNER'S ADDRESS _____

CITY, STATE, ZIP CODE _____

HOME PHONE # _____ CELL # _____



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NOTE: THE FOLLOWING THREE (3) TYPES OF WORK ARE NOT INCLUDED IN THE GENERAL CONTRACTORS' BUILDING PERMIT. CONTRACTORS ENGAGING IN THE TYPES OF WORK LISTED BELOW MUST BE LICENSED AND RESPONSIBLE FOR OBTAINING A SEPARATE PERMIT AND THEIR INSPECTIONS.

➤ *ELECTRICAL PLUMBING HVAC*

SUB-CONTRACTORS

	COMPANY NAME	PHONE NUMBER	LICENSE #
ELECTRICAL	_____	_____	_____
PLUMBING	_____	_____	_____
MECHANICAL	_____	_____	_____
SEWER/WATER	_____	_____	_____
EXCAVATION	_____	_____	_____
CONCRETE	_____	_____	_____
CARPENTRY	_____	_____	_____
ROOFING	_____	_____	_____
SIDING	_____	_____	_____
MASONRY	_____	_____	_____
GUTTERS	_____	_____	_____
INSULATION	_____	_____	_____
DRYWALL	_____	_____	_____
PAINTING	_____	_____	_____
WATERPROOF	_____	_____	_____
OTHER	_____	_____	_____

CONTRACTOR'S SIGNS: (MAXIMUM SIZE 16 SQ.FT.) MAY BE PLACED ON THE JOB SITE DURING CONSTRUCTION AND MUST BE REMOVED WITHIN 7 DAYS OF COMPLETION OF WORK. CONTRACTOR'S SIGN CAN NOT BE PLACED ON ANY EASEMENT.



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DETAILS OF CONSTRUCTION (SCOPE OF WORK, DIMENSIONS, MATERIAL, USE, ETC):

SITE PLAN DRAWING - *Does not have to be to scale. Site Plan drawing should be clearly labeled with measurements showing all existing structures and lot lines. Also, show proposed new structure location.*



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APPLICANT CHECK LIST (REQUIRED TO BE COMPLETED BY APPLICANT)

NOTE: FOR ANY UNDEVELOPED PROPERTY LOCATED IN AN APPROVED SUBDIVISION 10 YEARS OR OLDER OR ANY UNDEVELOPED PROPERTY NOT LOCATED IN AN APPROVED SUBDIVISION, A PROFESSIONAL PLAN THAT INCLUDES LIDAR MAPPING IS REQUIRED.

REGISTERED GENERAL CONTRACTOR AND SUBCONTRACTORS LIST (Page 2)

SITE PLAN DRAWN WITH DIMENSIONS AND CLEARLY LABELED SHOWING ALL EXISTING STRUCTURES, LOT LINES AND PROPOSED NEW STRUCTURE

ATTACH PROPERTY'S LEGAL DESCRIPTION

DRAWING/PLAT CERTIFICATION

THE UNDERSIGNED HEREBY CERTIFIES THAT THE IMPROVEMENTS SHOWN ON THE ATTACHED DRAWING/PLAT ARE WITHIN MY BOUNDARIES AND MEET ALL APPLICABLE SETBACK REQUIREMENTS OF THE HEBRON MASTER PLAN.

REVIEWED AND SUBMITTED

APPLICANT CERTIFICATION

THE INFORMATION WITHIN AND ALL ATTACHED EXHIBITS, ARE TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE AND CORRECT. THE OWNER, LESSEE, OR CONTRACTOR HEREBY AGREES TO ABIDE BY AND COMPLY WITH THE CONDITIONS OF ALL BUILDING AND HEALTH LAWS OF THE STATE OF INDIANA, AND THE UNIFIED DEVELOPMENT ORDINANCE OF THE TOWN OF HEBRON, IN. FURTHERMORE, THE APPLICANT UNDERSTANDS THAT ANY VARIATION OR VIOLATIONS FROM THE PROVISIONS OF THE ABOVE-MENTIONED LAWS AND ORDINANCES OR CONDITIONS SHALL CONSTITUTE A CAUSE FOR REVOCATION OF THIS PERMIT. THE APPLICANT HAS **READ** AND **UNDERSTANDS** THE PERMIT GUIDE, ALL MUNICIPAL AND STATE CODES WILL BE FOLLOWED OR WILL BE FINED ACCORDINGLY.

OWNER _____
Signature (sign in ink) _____ Print Name _____ Date _____

CONTRACTOR _____
Signature (sign in ink) _____ Print Name _____ Date _____