

RESIDENTIAL NEW HOME BUILDING PERMIT

"One & Two Family Residence" Property Owners Name: _____

Phone: _____

Address: _____ City: _____ Zip Code: _____

Applicants Name: _____ Phone: _____

Address: _____ City: _____ Zip code: _____

Email Address: _____

General Contractor: _____

Type of Use: ☐ Personal Residence ☐ Rental ☐ Other _____

Proposed Construction: ☐ New ☐ Remodel ☐ Other _____

Type of Construction: _____

Number of Bedrooms: _____ Number of Units: _____ Wastewater system to be connected to:

Total square footage of proposed construction: _____ ☐ City ☐ Septic ☐ Other _____

1st floor _____ 2nd floor _____ 3rd floor _____ Septic Permit No. _____

Basement _____ Covered decks/porches _____ Flood Plain: ☐ Yes ☐ No

Garage/Carport ☐ detached ☐ attached _____ Sink Holes: ☐ Yes ☐ No

Concrete patios square footage: _____ Watershed: ☐ Yes ☐ No

Demolition: ☐ Yes ☐ No

Estimated Construction Cost: _____ Estimated Start Date: _____

Permit No. _____ Zoning _____ Fee _____ Date _____

The applicant hereby certifies and agrees as follow: (1) I am authorized to make application. (2) I have read this application and attest that the information furnished is correct, including that contained in plans. (3) If there is any misrepresentation in this application, or associated documents, City of Bedford may revoke any permit or Certificate of Occupancy issued based upon this misinformation. (4) I agree to comply with all City of Bedford Ordinances, permit conditions and State statutes which regulate building construction, use, occupancy and site development. (5) I grant and will request City of Bedford Officials to enter onto the property listed on this application for the purpose of inspecting the work permitted by this application and posting notices. (6) I will retain the Certificate of Occupancy in my records upon completion of the project. NOTE: Plans shall mean all site and construction plans and specifications, whether furnished prior to or subsequent to the application date. All plans furnished subsequent to application date constitute an amendment to the original application and must be specifically approved by the City of Bedford with an appropriate endorsement and the signature of the approving official prior to plan implementation. The Permit is not valid, and work is not permitted until signed and issued by the agent of the Planning and Zoning Department. As the Person eligible and responsible for obtaining a permit or permits as required in the City of Bedford Building Code, and based upon information contained within these plans, I certify that these plans are identical to those released for construction by the Indiana Department of Fire and Building Services. I also understand that if it is determined that these plans are not identical, all permits obtained as a result of their submittal may be revoked as stated in the City of Bedford Building Code.

Signature of Applicant: _____ Received By: _____