CITY OF MICHIGAN CITY, INDIANA
100 E. Michigan Blvd. Michigan City, IN 46360
(219) 873-1415 – fax (219) 873-1550

CLASS 1 STRUCTURE
APPLICATION FOR COMBINED BUILDING PERMIT AND
IMPROVEMENT LOCATION PERMIT

DATE OF APPLICATION _______________ JOB NAME ___________________________

ADDRESS ________________________________________________________________

HISTORIC DISTRICTS □ Washington St. District □ Franklin St. District □ Elston Grove District

If your property is located in a Historic District, a “Certificate of Appropriateness” must be obtained for any exterior work before a building permit application can be processed.

Type of Construction Design Release (CDR) Project No. ________________
(Check one box)

** Please Note ** If a FOUNDATION ONLY PERMIT is issued, a new APPLICATION FOR BUILDING PERMIT MUST be filled out when the CDR is issued for the remainder of project.

PLANS REQUIRED: SITE PLANS - CONSTRUCTION PLANS

** Important Notes ** All construction activity shall be subject to the building permit and inspection requirements of the Building Code, in addition to the improvement location requirements of this ordinance.

Energy Conservation Study (COMcheck) Must be submitted for: • New Commercial Projects • Commercial Additions • Commercial Remodels • Pole Construction • Garage/Storage Buildings

Description of work (Check boxes) : □ New Commercial □ Commercial Addition □ Commercial Remodel
□ Pole Construction □ Garage/Storage Building □ Swimming Pool

Description of other work :

A BUILDING PERMIT DOES NOT INCLUDE: Electrical, Mechanical, Plumbing, and/or Sign Placement Permits. (Separate permits are required for each.)

Estimated Cost of Construction: __________________________________________
OWNER'S INFORMATION:
Owner's Name
Owner's Mailing Address
Owner's Telephone #

CONTRACTOR INFORMATION:
Contractor's Name
Contractor's Company Name
Contractor's Email
Contractor's Address
Contractor's Telephone #

SEPARATE PERMITS to be obtained for the following:

Electrical work to be done by:
HVAC work to be done by:
Plumbing work to be done by:
M S 4 work to be done by:
Storm Water work to be done by:

The applicant affirms that said building when construction is completed will be as herein described and further, that construction has not started as of this date.
Please note that City setback requirements are minimum requirements. Individual covenants or deed restrictions may contain requirements that are more restrictive.

SIGNED: ____________________________
Applicant

DEPARTMENT APPROVALS

Zoning District ________________________
Flood Plain __________________________
Historic District ______________________
Sanitary Official _______________________
Date ________________________________

Zoning Administrator Date Building Official Date

PERMIT FEE __________________________ PERMIT # __________________________
CASH – CHECK # ______________________ ISSUE DATE _______________________
RECEIPT # __________________________ Received By _______________________