

Signature of Applicant

## Johnson County Department of Planning & Zoning Modular Home Permit Application

	INTENDED USE OF STRUCTURE: (check one)
LOCATION OF WORK:	Residential
Address:	
City/Zip:	☐ Institutional: (church, school, government, etc)
Township:	
Subdivision:	CONSTRUCTION DETAILS:
Section: Lot #:	Approx. Value of Construction: \$
	Total Floor Area (everything under roof): sq. feet
CONTRACTOR: (only fill this section out,	Height to Peak (lowest to highest point)
if you are a listed contractor) (if you are the homeowne	
pulling permit, just write HOMEOWNER)	Number of Bedrooms:
Name:	Number of Bathrooms:
Address:City/State/Zip:	Full Basement:
Telephone #1:	Partial Basement: ☐Yes ☐No
Telephone #2:	If yes, (please mark) Finished Unfinished
Email:	, , , ,
How would you like to be notified when t	the permit
is ready?(please circle one) Phone or	Email OTHER DETAILS:
	Sewer Permit:
PROPERTY OWNER(S):	(Please enter the city, and also include a copy of the permit)
Name(s):	Septic Permit #:
Address:	(Please enter the Septic Permit #, and include a copy of the permit)
City/Zip:	Water:
Telephone #1:	(Please enter the city, and also include a copy of the permit)  Driveway Permit #:
Telephone #2:	(Please enter the Permit #, and include a copy of the permit, if existing
Email:	driveway include verification from Highway Department)
How would you like to be notified when t	the permit
is ready?(please circle one) Phone or	□ Email
Perjury. I will be responsible for all applicable  DOES NOT obviate the need to comply with the	rm, and the plans submitted are complete and accurate under the penalties of a laws and ordinances, and understand that approval of plans and the issuance of a permit hese laws and ordinances. I agree to hold harmless and indemnify Johnson County, Indiana m the undersigned, principal, sub-contractor, or supplier's errors of omission and/or

Printed/Typed Name

Date

DEPARTMENT USE ONLY	Date	Received:	Time Received:	
Parcel #: <u>41-</u>			Permit #:	
Section:			Permit Fee:	
Township:			Receipt #:	
Range:			Cash: Check #:	
Zoning:			Date Released:	
<u> </u>			Contractor Listing #:	
			Current?	
Plan Commission/BZA/Varian	ce Hearing Officer appro	val needed?   Ye	es 🗆 No	
SWPPP/Stormwater Review:				
FEMA Flood Hazard:  Yes	s 🗆 No		SWPPP/Stormwater Approved:	
F.I.R.M.#:			SWPPP/Stormwater Denied:	
Localized Flood: ☐ Yes ☐	No		Ву:	
MEPG: Rear = Fro	nt =		Stormwater Permit #:	
Site Plan Review:				
No Open Violations:		If <b>not</b> in plat, lot di	mension requirements met:	
☐ Yes ☐ No		☐ Yes ☐ No		
No Variance, Special Exceptio	un Rezoning <b>or</b>	Setback & Height re	aquiraments mat	
all applicable conditions, com	_	☐ Yes ☐ No	•	
☐ Yes ☐ No	,			
		LUV Approved:		
If in plat, are setback requirer		☐ Yes ☐ No		
easements, or miscellaneous  Yes No	-		Site Plan Approved: By:	
			Site Plan Denied: By:	-
Building Plan Review:				
Square Footage Calculation:	1 <sup>st</sup> Floor		Building Plans Approved:	
Square i ootage Calculation.	+ 2 <sup>nd</sup> Floor		Building Flans Approved	
	+ Basement		Building Plans Denied:	
	+ Bonus Roo	m	Sulfaing Flans Deflica	
	+ Porch	111	Ву:	
	= Total		<u></u>	
	x.10/square foot			
	= Total			