

Permit # _____

Receipt # _____



GENERAL BUILDING

Office Use Only:
FEMA Flood Zone?
Yes _____
No _____

TYPE OF IMPROVEMENT _____

Address _____

Township _____ SEC _____ TWP _____ R _____ Key Number _____

Subdivision _____ Lot _____ State Key Number _____

Square Footage of Work Being Done

of Bedrooms: _____

1st Floor _____ Att Garage _____ Deck _____ Porch _____ Shed _____

2nd Floor _____ Det Garage _____ Sunroom _____ Pole Barn _____ Grain Bin _____

Other _____

Foundation (Circle) Slab Crawl Basement: Unfinished _____ Finished _____

Power Company (Circle) Duke Energy Tipmont Other _____

Energy Path (Circle) Prescriptive Total UA Performance

PROPERTY OWNER _____ Phone Number _____

Contact Address _____

E-mail Address _____

GENERAL CONTRACTOR _____ Bond? Y N Expiration Date: ____/____/____

Contact Address _____

Phone Number _____ Cell Number _____

E-mail Address _____

I certify that the information contained in this application, including all attachments, is true and correct to the best of my knowledge & belief.

And furthermore, when engineered systems or products are used that are not covered by the applicable codes, it is the responsibility of the General Contractor or Property Owner, not the Building Official, to make sure that the system or product is installed correctly.

X OWNER _____ Date ____/____/____

X CONTRACTOR _____ Date ____/____/____

Fees:	SQ FT _____ x \$0.17=\$ _____	Electric =\$ _____	Filing = \$ _____
	SQ FT _____ x \$0.14=\$ _____	Penalty = \$ _____	Permit = \$ _____
	SQ FT _____ x \$0.24=\$ _____	TOTAL = \$ _____	

Mike Wolf
20 N. 3rd Street
Lafayette, IN 47901



Permit #: _____
Building Commissioner
PHONE: 765.423.9225
FAX: 765.423.9203

WEBSITE: www.tippecanoe.in.gov

Senate Enrolled ACT No. 393: Fire Safety Notification

- Requirements: -Class 1 or 2 Structure
-Permits issued after 6/30/2018
-Reporting use of "Advanced Structural Components" (Lightweight I-joist or roof trusses)

Tippecanoe County, Indiana	New Structure 393
Street Address: _____	
Township:	
<input type="checkbox"/> Fairfield <input type="checkbox"/> Jackson <input type="checkbox"/> Lauramie <input type="checkbox"/> Perry <input type="checkbox"/> Randolph <input type="checkbox"/> Sheffield <input type="checkbox"/> Shelby <input type="checkbox"/> Tippecanoe <input type="checkbox"/> Wabash <input type="checkbox"/> Washington <input type="checkbox"/> Wayne <input type="checkbox"/> Wea	
<hr/>	
<input type="checkbox"/> I do NOT have any Advanced Structural Components	
<hr/>	
Check ALL that apply:	
<input type="checkbox"/> Lightweight I-joists, First Floor <input type="checkbox"/> Lightweight I-joists, Second Floor <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> Lightweight Roof Truss <input type="checkbox"/> Floor Truss	
Other: _____ _____	
I, _____ (printed name) verify that the information provided is true and correct to the best of my knowledge.	
Signature _____	Date _____

For Office Use Only:

Sent to Emergency 911 on: _____
Sent to LFD on: _____
Sent to WLFD on: _____
Sent to Volunteer Fire Depts on: _____