



# Residential Improvement Location Permit

Fee: New Primary Structure: \$25  
Additions or Remodeling \$15  
Accessory Structures \$15

Date \_\_\_\_\_ (*permit is good for one year*)

Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Property Owner \_\_\_\_\_

Address & Legal Description of Project Site \_\_\_\_\_

Lot Dimensions \_\_\_\_\_ Total Lot Area \_\_\_\_\_

Description of Proposed Project (*type of structure & use*) \_\_\_\_\_

Dimensions of Project \_\_\_\_\_ FT X \_\_\_\_\_ FT Total Square Feet \_\_\_\_\_

Foundation Type \_\_\_\_\_ Structure Height \_\_\_\_\_

Materials/Type of construction \_\_\_\_\_

Estimated Cost \_\_\_\_\_ Estimated Completion Date \_\_\_\_\_

I certify the accuracy of all information provided with this application. This includes the plot plan, legal description, and dimensions of the proposed improvements shown. I understand that the City of Butler reserves the right to revoke this permit upon finding that the work performed is not consistent with the information supplied in this permit.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## For Office Use Only

Zoning District \_\_\_\_\_ Flood Zone \_\_\_\_\_

Type of Land Use \_\_\_\_\_

Setbacks: *front* \_\_\_\_\_ *rear* \_\_\_\_\_ *sides* \_\_\_\_\_

Height \_\_\_\_\_ Lot Coverage \_\_\_\_\_ Parking Spaces \_\_\_\_\_

Permit Issued  Permit Denied

Permit Issued with the following conditions: \_\_\_\_\_

Approved by \_\_\_\_\_ Date \_\_\_\_\_

*For questions, contact the City of Butler - 201 South Broadway, Butler, IN 260.868.5200*

*A building permit from the DeKalb County Building Dept. may be required-215 E. 9th St., Suite 302, Auburn 260.925.3021*

*For the location of gas, phone, and cable lines call Holey Moley at 1.800.382.5544*