



New Commercial or Industrial Structure

Application

A complete application and ALL required attachments are to be submitted prior to review.

Fees

Fees are paid when the building permit is picked up. A detailed summary of the calculated fees will be supplied with your permit.

New Structure: \$575 base fee plus applicable inspections for the project

2012 Inspection and Re-inspection Fees							
	Temporary electric	Footing or slab/foundation	Rough-in electric	Rough-in plumbing	Rough-in HVAC	Rough-in framing	Final
New Structure	\$125	\$250	\$250	\$250	\$250	\$250	\$1,000

Fees include one (1) hour of site plan review and two (2) hours of structure review. Additional review time is billed at a rate of \$125/hour.

Submittal

Applications can be submitted electronically to wpcstaff@whitestown.in.gov. The application and one copy of each of the attachments must be merged into one single pdf attachment. Applications may also be dropped off at the Whitestown Utility Office, 6999 Lexington Circle, Zionsville, IN 46077.

- Application for Improvement Location Permit.
- Tax Parcel ID #: This number is required on the permit application and can be found on the Boone County GIS website at www.boonecounty.in.gov.
- Certified Site Plan (two hard copies)
- Erosion Control Plan (two hard copies)
- Health Department Review (one copy) – if food service is included
- Copy of approved Development Plan and Development Commitments (if approved by Boone County) (two hard copies)
- Construction Plans (two hard copies)
- Copy of State Commercial Design Release and state approved plans.
- HVAC, Plumbing, and Electrical Layout (two hard copies)
- Proof of Sewer and Water Service – obtain from applicable utility prior to submitting application and enter permit number on the application form.
 - o Whitestown Utilities: 6999 Lexington Circle, Zionsville, IN 46077, (317) 733-8584
- Drainage Permit - Boone County Surveyor: 116 W Washington Street, Room 102, Lebanon, IN 46052, (765) 483-4444. Obtain prior to submitting application and enter permit number on the application form.
- Driveway Permit.
 - o Local Roads: Town of Whitestown, 6999 Lexington Circle, Zionsville, IN 46077, (317) 733-8584
 - o County Roads: Boone County Highway Dept, 1955 Indianapolis Avenue, Lebanon, IN 46052 (765) 482-4550
 - o State Roads: State Highway Department, P.O. Box 667, Crawfordsville, IN 46933 (765) 362-3700

Inspections

The permit holder is required to call in for all applicable inspections. Failure to obtain all applicable inspections could result in a zoning violation. Call (317) 313-7327 at least 48 hours in advance to schedule an inspection. Re-inspection fees are assessed for failed inspections per the chart above and must be paid prior to issuance of a Certificate of Occupancy.



New Commercial/Industrial Structure

For Office Use Only

Permit #:	_____
Fee:	_____
Date Issued:	_____

Application is hereby made for a permit to improve the premises as shown in the accompanying plans and specifications, which are made a part of this application in reliance upon which the Town of Whitestown is requested to issue an improvement location permit. It is understood and agreed by this Applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this Applicant, such as might or would operate to cause refusal of this application, or conditional approval thereof, or any material alteration or change in the accompanying plans, specifications or improvements subsequent to the issuance of a permit in accordance with the application, without the approval of the Town of Whitestown shall constitute sufficient ground for the revocation of this permit.

Date of Application:	Sewer Permit #:	Drainage Permit #:	State CDR#:
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Name of Applicant: _____

Address of Applicant: _____

Contact Person for the Permit: _____

Contact Phone:	Contact Mobile:
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Contact Email: _____

Name of Contractor: _____

Address of Contractor: _____

Contact Person:	Contact Phone:
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Address of Location to be Improved: _____

Subdivision:	Section #:	Lot #:
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Tax Parcel ID#: _____

TOTAL Structure Size (sqft): _____

Approximate Construction Cost: _____

The undersigned represents that such work shall start within 90 days and will be completed without delay; that said improvements will be finished in a good workmanlike manner. Should said work not start in good faith within 90 days, the undersigned understands this application will be void and of no force or effect whatever. The above information, to my knowledge and belief, is true and correct:

Signature of Applicant: _____