

# Department of Development Services

## COMMERCIAL/INDUSTRIAL PERMIT



61 N. Green Street | Brownsburg, IN 46112

Phone 317-852-1128 | Fax 317-852-1134

[www.brownsburg.org](http://www.brownsburg.org)

### Items to be included with this application:

#### Required Submittals:

- Completed Application (signed by the Applicant)
- Affidavit and Consent of Property Owner
- Statement of Financial Responsibility (signed by the Owner)
- Six (6) copies of the building plan.
- One (1) electronic copy of the stamped Development Plan.
- NOI/SWPPP
- Electronic Copies of all submittal items.

#### Additional Requirements:

- Americans with Disabilities Act (ADA) Compliance.
- Roof Truss Plans, Stamped by an engineer (if trusses are used).
- Floor Truss Plans, Stamped by an engineer (if trusses are used).
- Sprinkler/fire suppression plans.
- Estimated Construction Schedule.
- Right-of-Way Permit (for work within Right-of-Way).
- State Release
- Energy Performance Documents

#### Unified Development Ordinance (UDO) & Other Code Links:

Unified  
Development  
Ordinance (UDO)



Scan me

[http://bit.ly/  
UDO-2015](http://bit.ly/UDO-2015)

Com./Ind. Arch.  
Development  
Standards



Scan me

[http://bit.ly/  
ComIndArchStds](http://bit.ly/ComIndArchStds)

Density  
Development  
Standards



Scan me

[http://bit.ly/  
DensityandIntensity](http://bit.ly/DensityandIntensity)

Ch. 151 Stormwater  
Management



Scan me

[http://bit.ly/  
TitleXVCh151](http://bit.ly/TitleXVCh151)

2012 International  
Building Code (IBC)



Scan me

[http://bit.ly/  
IBC-2012](http://bit.ly/IBC-2012)

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PROJECT NAME:	RECEIVED STAMP
PERMIT #:	
RECEIPT #:	

### COMPLETE THE FOLLOWING:

<b>Applicant:</b>	Company:			
	Contact:		Email:	
	Address:		City, State	Zip code:
	Phone #:	Cell #:	Fax #:	

Check if the Applicant is the Property Owner.

<b>Property Owner:</b>	Company:			
	Contact:		Email:	
	Address:		City, State	Zip code:
	Phone #:	Cell #:	Fax #:	

Check if the Applicant is the Project Contact.

<b>Project Contact:</b>	Company:			
	Contact:		Email:	
	Address:		City, State	Zip code:
	Phone #:	Cell #:	Fax #:	

<b>Location &amp; Project Info:</b>	Parcel #:		Estimated Cost:
	Site Address:		Suite #:

Subdivision:	Lot #:	Township:
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<b>Location/ Project Information:</b>	Zoning District :	Est. Start Date:	Est. Finish Date:	Existing Impervious Area (SF):
	Lot Area (SF):	New Impervious Area (SF):	Total (SF):	Lot Coverage: ____ %
	Site in a Floodplain? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, FIRM#:		Min. Flood Protection Grade (MFPG):
	Front Setback: ____ Ft.	Side Setback: ____ Ft.	Rear Setback: ____ Ft.	Driveway Setback: ____ Ft.
<b>Type of Improvement:</b>	<input type="checkbox"/> New Structure <input type="checkbox"/> Addition	<input type="checkbox"/> Remodel <input type="checkbox"/> Foundation Only	Construction Type:	Occupancy Group:
Number of Elevators:	#of Floors:	#of Units:	Type of Foundation:	Sump Pump? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Energy Code:</b>	<input type="checkbox"/> Prescriptive <input type="checkbox"/> Total UA	<input type="checkbox"/> Performance <input type="checkbox"/> N/A	Floor Structure: <input type="checkbox"/> Nominal <input type="checkbox"/> Truss	Roof Structure: <input type="checkbox"/> Rafter <input type="checkbox"/> Truss
Water Provider:	Meter Size: Irrigation Size:	Town Supplied Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No	Town Tapping the Water Main? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sewer Provider:	Lateral Size:	No. of Private Hydrants:	Fire Line Size:	
Construction Design Release #'s				
<b>Square Footage:</b>	1st Floor:	2nd Floor:	3rd Floor:	Total (SF) Under Roof:
	Garage:	Parking Lot:	Basement:	Total Project (SF):
<b>Project Description:</b>				





# Department of Development Services

## STATEMENT OF FINANCIAL RESPONSIBILITY WITHIN THE PUBLIC RIGHT-OF-WAY

### COMMERCIAL/INDUSTRIAL PERMIT

That I/we \_\_\_\_\_ after first being duly sworn, depose and say:

That I am/we are the owner(s) (the "Owner") of the Real Estate (the "Property") located at:

\_\_\_\_\_, Brownsburg, IN 46112.

Parcel Number(s): \_\_\_\_\_

That I/we understand the following:

1. As the Owner, I/we shall be responsible for repairs or reconstruction for damage, expenses and liabilities to the public right-of-way and/or public infrastructure (e.g. sidewalks, curb and gutter, roads, storm, water and sanitary infrastructure) which arises out of or is resulting directly or indirectly from Owner's (and/or any of Owner's employees, agents, contractors, invitees, licensees, officers, owners, directors, assigns or affiliates) activities associated with this permit, including but not limited to driving or allowing heavy vehicles on the sidewalk. Owner shall be responsible for the repair and/or reconstruction of such damage, expense and liability to the satisfaction of the Town of Brownsburg (the "Town") and paying the costs thereof.
2. In the event that the Owner causes damage to the public right-of-way and/or public infrastructure and fails to comply with the requirements set forth herein, the Town may, at its discretion, take action to correct the condition and recover the costs of doing so using the following procedures:
  - A. Written notice shall be given by the Town to the Owner describing the property involved and the condition to be remedied, requiring the Owner within a reasonable time but not less than fourteen days to take such action as may be necessary or as may be specified to correct the condition, and advising that failure to do so will result in further actions and legal procedures by the Town to require immediate correction of the condition.
  - B. If the condition described in the notice is not corrected within the time limit set by the notice, the Town may take appropriate actions, including but not limited to, whatever actions at law or in equity are necessary or appropriate to correct the condition.
  - C. If the Town takes any corrective action described above, all costs of such action shall be charged to the Owner. Costs shall include but not be limited to labor and material for performance of the work and any repair, administrative and supervisory time, attorneys' fees and costs, and disposal fees. Owner will cooperate with the payment of all fees within 7 days upon receipt of billing from the Town. If costs are not paid by Owner in full within 7 days of receipt of billing from the Town, then the Town will add a penalty of one percent per month to the outstanding balance until the outstanding balance is fully paid by the Owner.

STATE OF \_\_\_\_\_ )

)

SS:

COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name

BEFORE ME, the undersigned, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_, who acknowledged the execution of the above and foregoing instrument to its voluntary act and deed on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Commission Expiration Date

\_\_\_\_\_  
Notary

\_\_\_\_\_  
County of Residence

\_\_\_\_\_  
Printed Name

# Department of Development Services

## BROWNSBURG FIRE TERRITORY FIRE PROTECTION EQUIPMENT

### COMMERCIAL/INDUSTRIAL PERMIT

### REVIEW



### Brownsburg Fire Territory

470 East Northfield Drive  
Brownsburg, Indiana 46112  
317-852-1190



The Following information shall be completed prior to any location improvement or permitting:

1. Please Identify what components the building will contain:

<u>Fire Protection Equipment</u>	<u>Yes</u>	<u>No</u>	<u>Add. Info</u>	
Fire Sprinkler System			Building Name:	
Fire Alarm System			Address:	
Other Fire Suppression System			Project Sq. Ft.:	
Kitchen Hood System			Building Class:	
Fuel Tanks			Occupancy Load:	

2. If this is a remodel what was the space or building being used for prior to improvements?  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

#### Office Use Only

<u>Plan Review &amp; Inspection</u>	<u>Fee</u>	<u>Check one:</u>	<u>Plan Review &amp; Inspection</u>	<u>Fee</u>	<u>Check Any:</u>
Tier 1 ≤ 1,500 Sq. Ft.	\$150		Sprinkler System	\$100	
Tier 2 1,501-5,000 Sq. Ft.	\$300		Fire Alarm System	\$100	
Tier 3 5,001-10,000 Sq. Ft.	\$400		Kitchen Hood System	\$100	
Tier 4 10,001-20,000 Sq. Ft.	\$500		Commercial Flammable Tank	\$100	
Tier 5 20,001-50,000 Sq. Ft.	\$600		Underground Flammable Tank	\$25	
Tier 6 ≥ 50,001 Sq. Ft.	\$1,000 + .01/Sq. Ft. over 50K		Notes:		
			<b>Total Fees:</b>	<b>\$</b>	

**Fees Reviewed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_