



Checklist for Building Permit Application

The following materials shall be submitted and reviewed by the Floyd County Department of Building & Development Services PRIOR to the approval of a residential building permit. If any of the materials are absent, the building permit WILL NOT BE ISSUED until all required materials are submitted. Please allow 5-7 business days for review of your permit application.

Complete Application Form

Health Department Approval or Sewer Tap-in Receipt

- **For New Dwellings:** Septic Permit or Sewer Tap-in Receipt
- **For Accessory Structures/Rehabs/Additions:** FCHD Site Approval Permit (if septic is on site)

Site Plan Detailing:

- All Property lines & streets
- Location and size of all existing and proposed structures
- Location of all existing underground and above ground LP gas tanks
- Setback distances from proposed structure to property lines and County right-of-way
- The location of all existing and proposed driveways, including material and culvert location and size (if applicable)
- The location of all drainage, utility, and road easements located on the property
- Arrows indicating direction of post-construction water drainage
- North arrow

Note: Applications for new single family dwellings require a site plan from an Indiana Licensed Surveyor or Engineer

Copy of Recorded Deed or Purchase Contract

Building Plans Detailing:

- Elevations (front, back, both sides)
- Wall Section (cross-section), Stairway Detail, Deck Construction Details (if applicable)
- Door and window detail
- Foundation Plan
- Floor Plans for each level of building

For Manufactured Homes

- Pictures of HUD Data Plate and Data Label; or Indiana Modular/Mobile Insignia floor plans
- Pier layout tie-down/anchoring specifications

Note: If proposed structure lies within an existing subdivision, please check with the controlling entity to ensure conditions are met.



Floyd County
Department of Building & Development Services
 2524 Corydon Pike Suite 203
 New Albany, IN 47150
 Phone: (812) 981-7611
 Fax: (812) 948-4744
 Building@floydcounty.in.gov

Square Footage

Square Footage of Project: (In additions/rehabilitations, this pertains ONLY to the scope of work included in this project)

Square Footage Totals:	Finished SQFT	Unfinished SQFT	Total
Basement (if applicable)			
1 st Floor (excluding garages and covered porches/patios)			
2 nd Floor (excluding covered porches and/or patios)			
Garage	<i>Not Applicable</i>	<i>Not Applicable</i>	
Total SQFT of any covered porches, covered patios, and/or ANY deck 30" or more above adjacent grade	<i>Not Applicable</i>	<i>Not Applicable</i>	
Total SQFT:			

<i>No. of Bedrooms</i>	<i>No. Full Bath</i>	<i>No. Half Bath</i>	<i>Total No. Bathrooms</i>	<i>Est. Cost of Project</i>
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Disclaimer and Signature

The plans which have been furnished to the Floyd County Department of Building & Development Services are a basis upon which Floyd County is entitled to act in issuing or revoking any permit or certificate of compliance. The plan(s) are incorporated, by reference, into this application. If there is any misrepresentation in this application or any associated documents, Floyd County may revoke any permit or Certificate of Occupancy issued in reliance upon such representation. I agree to comply with all Floyd County Ordinances, permit conditions, and State statues which regulate the building and construction, use, occupancy, and site development, and grant Floyd County Officials the right to enter onto the property for the purpose of inspecting work related to this permit and/or posting any notices deemed necessary. I understand that, should I fail to have work ready for inspection and a reinspection is deemed necessary, a reinspection fee of \$50 may be assessed. Furthermore, I understand that the 2005 Indiana Residential Code, as it pertains to energy efficiency (675 IAC 14-4.3 139.1), mandates a permanent certificate to be posted on or in the electrical distribution panel, and my failure to ensure that this posting is in place at time of final inspection of a new dwelling will result in an automatic failure of inspection and \$50 reinspection fee. Spec sheets for all engineered materials are required to be on site during times of construction for inspector reference. Failure to do so may result in a delay in your inspection process.

As the applicant for a building permit, I understand that I am required to request all inspections before a building can be occupied. Under Floyd County Zoning Ordinance 2006-6, it is unlawful to occupy a building until a Certificate of Occupancy has been issued by the Floyd County Building Commissioner. There are no exceptions to this rule. Under the terms of the Ordinance, I have an obligation to obtain a Certificate of Occupancy. I further acknowledge that I may be fined in accordance with Floyd County Zoning Ordinance 2006-6 in the event that I fail to comply with this requirement. I acknowledge that it is my obligation to inform the occupant of the structure if a Certification of Occupancy has not been issued, or if any outstanding code violations exist. I acknowledge my obligation to obtain a Certificate of Occupancy under Floyd County Zoning Ordinance 2006- 6, and understand that I have an obligation to advise any potential occupant of my failure to have final inspection completed and/or have a Certificate of Occupancy issued. I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

Fee Schedule

Residential

Single Family or Two Family Dwelling (excluding garage, attic areas, etc.)	\$200 base fee plus \$.15 per square foot of floor area
Multi-Family Dwelling	\$300 per unit
Accessory Structures Detached Garage	\$40 minimum or \$.15 per square foot of floor area
Accessory Structures Attached Garage	\$100 minimum or \$.15 per square foot of floor area
Additions	\$55 base fee plus \$.15 per square foot of floor area
Interior Remodel	\$40 base fee plus \$.15 per square foot of floor area
Swimming Pool	\$250
Temporary Mobile Home	\$155 first two years \$300 per year after first two years

Commercial and Industrial

Commercial and Industrial Structures	\$530 base fee plus \$.15 per square foot of floor area
Interior Remodel	\$110 base fee plus \$.15 per square foot of floor area
Accessory Structures and Additions	\$150 minimum plus \$.15 per square foot of floor area

Other Structure Fees and Fines

Change in Electrical Service	\$60
Parking Structure	\$15 per parking space
Re-Inspection	\$75 Residential \$180 Commercial/Industrial
Early Bird Fine (Start of construction prior to permit issuance)	Twice the amount of permit
Variance Fine (construction did occur as per approved site plan)	Five times the cost of the permit plus the cost of the variance
Zoning Code Violations	\$75 per day per violation

Compliance with IC 22-11-21

Firefighter Safety Notification

(effective 7/1/18)

LOCATION:

Street Address: _____ County: _____

Type of Structure: _____ Township: _____

LOT #: _____ Subdivision: _____

*** This applies to Class 1 or Class 2 structures.

Floyd County is required to notify local fire departments and local 911 call centers when "advanced structural components" (lightweight I-joists or lightweight roof trusses) are utilized in the construction of Class 1 or Class 2 structures. "Advanced structural components" are defined as:

- (1) Have less mass cross-sectional area than sawn lumber of equivalent proportions used in an equivalent application; and
- (2) Are assembled from combustible or noncombustible materials, or both.

Location of Advanced Structural Components:

Floor Type of Advanced Structural Component: _____

Roof Type of Advanced Structural Component: _____

Both Type of Advanced Structural Component: _____

None

Completed by:

Signature Date ____/____/____

Print Name Title _____

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SUPPLEMENTAL CONSTRUCTION STATISTICS SHEET

The set of building plans must include a drawing of each floor (specifying the dimension and use of each room); foundation plans; and a detailed cross-section. Please show the size, spacing, grade, and species of lumber used for floor joists. If the size, spacing, grade, species, or direction of span varies within the structure, please indicate *each* variation.

For additions and rehabilitations: Please indicate walls to remain and walls which are to be removed. Also, please label the use of all rooms adjacent to the proposed addition/rehab.

Foundations:

Basement: _____
Crawl Space: _____
Slab on Grade: Other: _____
Footer Size: _____
Wall Size: _____

Ceiling Joist:

Lumber Size: _____
Species: _____
Grade: _____
Spacing (O.C.): _____

Girder/Header Beam:

Steel/LVL: _____
Lumber Size: _____
Species Type: _____
Grade: _____

Floor Joist:

Lumber Size: _____
Species Type: _____
Grade: _____
Spacing (O.C.): _____
Joist Span: _____

Wall Framing:

2X4: _____
2X6: _____
Spacing (O.C.): _____

Fireplace:

Factory Built: _____
Gas/Electric: _____
Other: _____

Rafter Systems:

Rafters: _____
Trusses: _____
Lumber Size: _____
Species Type: _____
Grade: _____
Spacing (O.C.): _____

Electrical:

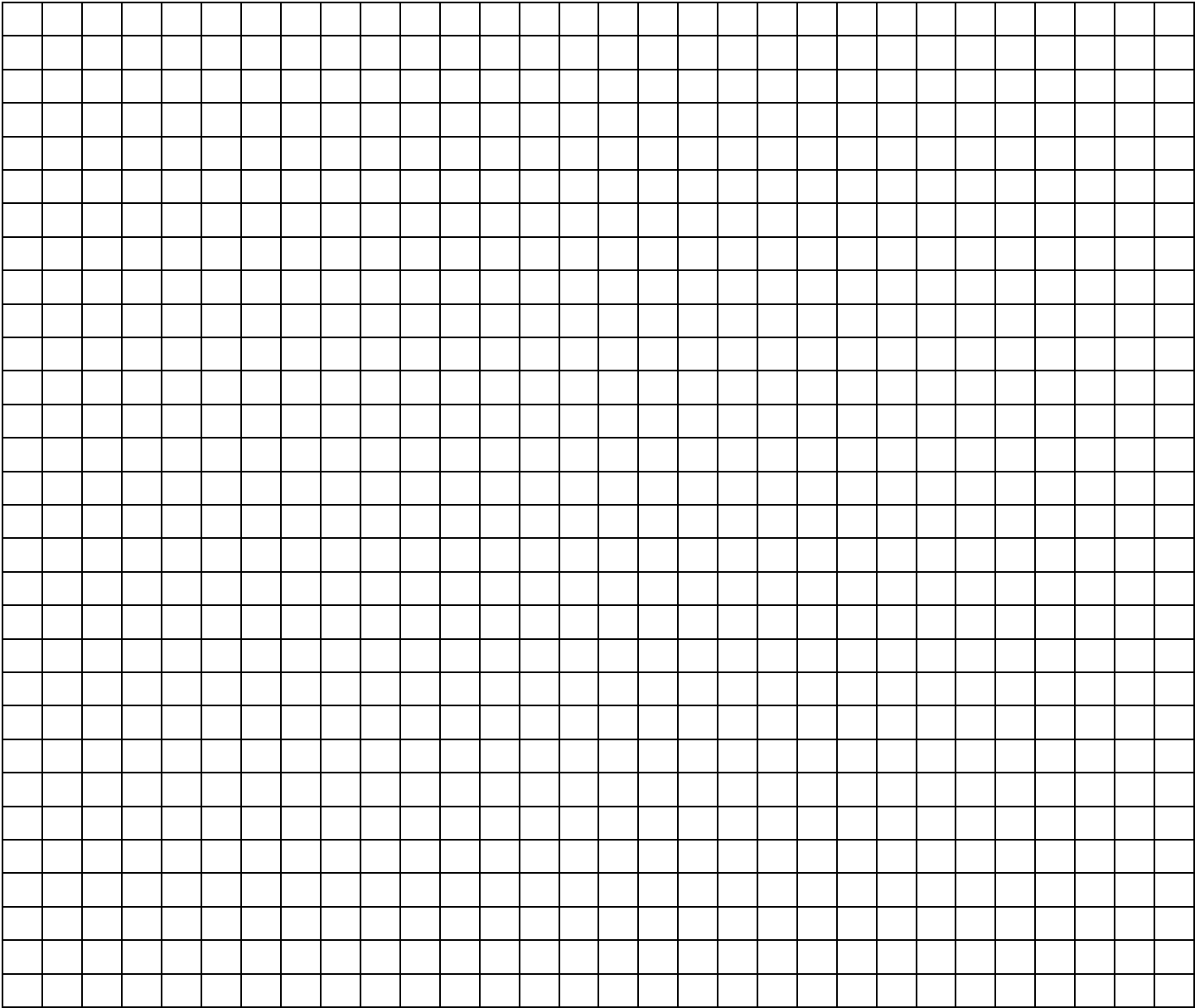
100A: _____
200A: _____
Other: _____
Location: _____
Sub Panel(Y/N): _____
100A: _____
200A: _____
Other: _____
Location: _____

Sample Accessory Structure Site Plan Diagram

The site plan **must show** the following to be accepted:

- North Arrow
- Road Frontage
- Access/Driveway and Culvert Location (if applicable)
- Location of all structures and specific use
- Distances between structure and property lines
- Easements and/or right-of-way
- Location of all underground and above ground LP Tanks
- Property Lines and dimension of proposed structure

Draw at scale (Each square is _____ = 10')





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Homeowner's Location of Accessory Structure on Plot Diagram Affidavit

I, _____, am submitting an alternate site location plan in lieu of a
survey done by a licensed surveyor for the property located at

_____ in Floyd County, Indiana.

By signing this document I agree to place the structure in the location presented to staff. I understand that there may be errors in dimension and location, therefore, I accept all legal responsibility and consequences for violation of easements, zoning code, and drainage.

Signature: _____ Date: _____

Permit # _____

SUBSCRIBED AND SWORN BEFORE ME

THIS ____ DAY OF _____, 20 ____.

NOTARY PUBLIC _____

COUNTY _____

MY COMMISSION EXPIRES _____

Safety Information for Residential Pools

675 IAC 14-4.3-296 Safety features

Sec. 296. Section S4226 Safety features is added as follows:

(1) S4226.1 A residential pool shall be provided with a suitable handhold around its perimeter in areas where depths exceed three (3) feet six (6) inches. Handholds shall be provided no further apart than four (4) feet and shall consist of any one (1) or a combination of items listed as follows:

(A) Coping, ledge, or deck along the immediate top edge of the pool that provides a slip-resisting surface of at least four (4) inches minimum horizontal width and located at or not more than twelve (12) inches above the waterline.

(B) Ladders, stairs, or seat ledges.

(C) A secured rope or railing placed at or not more than twelve (12) inches above the waterline.

(2) S4226.2 Rope anchor devices shall be installed at a minimum of one (1) foot and a maximum of two (2) feet on the shallow end side of a point of change in floor slope. In pools where the slope change occurs in water depths less than four (4) feet six (6) inches, a transition rope supported by buoys shall be installed.

(3) S4226.3 Access to residential pools shall be restricted by one (1) of the following means:

(A) Walls or fencing not less than four (4) feet high and completely surrounding the pool and deck area with the exception of self-closing and latching gates and doors, both capable of being locked.

(B) Other means not less than four (4) feet high and deemed impenetrable by the enforcing authority at the time of construction and completely surrounding the pool and deck area when the pool is not in use.

(C) A combination of clauses (A) and (B) that completely surrounds the pool and deck with the exception of self-closing and latching gates and doors which are capable of being locked. This applies to clauses (A) and (B) and this clause only.

(D) A power safety pool cover that:

(i) shall provide a continuous connection between the cover and the deck, so as to prohibit access to the pool when the cover is completely drawn over the pool;

(ii) shall be mechanically operated such that the cover cannot be drawn open or retracted without the use of a:

(AA) key; or

(BB) key and switch; or

(CC) touch pad with a personal access code;

(iii) is installed with track, rollers, rails, guides, or other accessories necessary to accomplish items (i) and (ii), in accordance with the manufacturer's instructions; and

(iv) shall bear an identification tag indicating that the cover satisfies the requirements of ASTM F 1346-19 (Reapproved 2003), Standards Performance Specification for Safety Covers and Labeling Requirements for All Covers for Swimming Pools, Spas, and Hot Tubs, as published by ASTM International, 100 Barr Harbor Drive, PO Box C700, West Conshohocken, Pennsylvania 19428-2959 for power safety pool covers.

(4) S4226.4 Not less than the following lifesaving equipment shall be installed with each residential swimming pool:

(A) A ring or throwing buoy fitted with forty (40) feet of one-fourth (1/4) inch diameter line.

(B) A pole not less than twelve (12) feet in length.

(C) Access to a telephone.

STAFF REVIEW FORM

DEPARTMENT USE ONLY

Received by: _____ Date Received: _____ Time Received: _____

Application # _____ Permit # _____

Applicant Name: _____ **Parcel Number:** _____

Address: _____ **Subdivision/Lot #:** _____

- Complete Application
- Site Plan
- Health Department/Sewer Tap-In Receipt (FCHD Permit #/Receipt # _____)
- Building Plans
- Firefighter Safety Notification IC-22-11-21 Form

Development Standards Review

Zone District: _____ Type of Structure: _____

Minimum Setbacks Required: Front: _____ Side: _____ Rear: _____

Actual Setbacks: Front: _____ Side: _____ Rear: _____

Setbacks Met: Yes/ No

Is Accessory Subordinate to Primary Structure? _____

Minimum Ground Floor Area: _____ Met? Yes/No

Maximum Height: _____ Met? Yes/No Lot Coverage % _____

Located in Flood Zone? Yes/No Located in Steep Slope District? Yes/No

Located in Easement? Yes/No _____

Plan Commission/BZA Approval Needed: Yes/No

Previous Board Action: Docket #: _____ Approval Date: _____

Signature of Staff: _____ Date: _____

Fee Calculation

Base Fee: _____

Garage: _____

_____ Total Sq. Ft. x \$0.10 = \$ _____

Total Due: \$ _____

Additional Comments:

Development Standards Review Date: _____

Building Plans Review Date: _____

Approval Date: _____