



CITY OF CARMEL

COMMERCIAL / MULTI-FAMILY AMENDMENT TO EXISTING PERMIT

Please complete form and email to permits@carmel.in.gov.
 If you have any questions, please call Building & Code Services at (317) 571-2444.

PERMIT HAS BEEN ISSUED: <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PERMIT #:	<input style="width: 95%;" type="text"/>
---	--------------------------	--

BUILDER OF RECORD	NAME	PHONE		
	STREET ADDRESS	CITY	STATE	ZIP
	E-MAIL ADDRESS	BEST METHOD OF CONTACT <input type="checkbox"/> PHONE <input type="checkbox"/> E-MAIL		
PLUMBING CONTRACTOR	NAME	STATE OF INDIANA LICENSE NUMBER		

PROJECT LOCATION	PARCEL NUMBER			
	ADDRESS (INCLUDING SUITE NUMBER)	CITY	STATE	ZIP

TYPE OF STRUCTURE	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> INSTITUTIONAL	<input type="checkbox"/> MULTI-FAMILY NUMBER OF UNITS: _____
--------------------------	-------------------------------------	--	---

PROJECT DETAILS	<input type="checkbox"/> NEW STRUCTURE	<input type="checkbox"/> TENANT FINISH	<input type="checkbox"/> REMODEL	<input type="checkbox"/> ACCESSORY BUILDING	<input type="checkbox"/> CELL TOWER
	<input type="checkbox"/> ADDITION	<input type="checkbox"/> Room	<input type="checkbox"/> Porch	<input type="checkbox"/> Deck	<input type="checkbox"/> GARAGE <input type="checkbox"/> Attached <input type="checkbox"/> Detached
	NEW COST OF CONSTRUCTION (EXCLUDING LAND) \$		NEW SQUARE FOOTAGE		

STATE OF INDIANA CDR	PROJECT NUMBER	RELEASE DATE	CONSTRUCTION TYPE	OCCUPANCY CLASSIFICATION
	SCOPE OF RELEASE	<input type="checkbox"/> FDN <input type="checkbox"/> STR	<input type="checkbox"/> ARCH <input type="checkbox"/> HOOD	<input type="checkbox"/> ELEC <input type="checkbox"/> MECH
		<input type="checkbox"/> PLUM <input type="checkbox"/> SPKLR	<input type="checkbox"/> OTHER _____	

DESCRIPTION OF AMENDMENT AND/OR STATE RELEASE ADDENDUM INFORMATION:

Class I structure permits are subject to the State of Indiana General Administrative Rules (GAR 675 IAC 12) regarding expiration time frames for beginning and completing construction.

I, the undersigned, agree that any construction, reconstruction, enlargement, relocation, or alteration of a structure, or any change in the use of land or structures requested by this application will comply with and conform to all applicable laws of the State of Indiana and the Carmel Unified Development Ordinance (Z-625-17) and amendments, adopted under authority of I.C. 36-7 et seq, General Assembly of the State of Indiana, and all Acts amendatory thereto. I further certify that only kitchen, bath, and floor drains are connected to the sanitary sewer. I further certify that the construction will not be used or occupied until a Certificate of Occupancy or of Substantial Completion has been issued by the Department of Community Services, Carmel, Indiana.

Signature of Owner or Authorized Agent _____ Date _____