



Town of Hudson

Application: Improvement Location Permit

Date: _____

Permit No.: _____

The undersigned agrees that any construction, reconstruction, enlargement, relocation, or alteration of structure(s) or any changes in use of the land or structure(s) requested by this application will comply with and conform to all applicable laws of the State of Indiana and ordinances of the Town of Hudson, adopted under the authority of Chapter 174, General Assembly of the State of Indiana, and all acts amended thereto.

Name of Applicant: _____

Phone No.: _____

Address: _____

Owner Name, Address, and Phone No. (If different from Applicant): _____

Address of property where improvement(s) will be located: _____

Subdivision Name: _____ Block No. _____ Lot No. _____

Present use of the property: _____

Note: Every application for an Improvement Location Permit shall be accompanied by a site plan showing the location of the structure(s), improvement(s), or use to be altered, placed, erected or located, the dimensions of the lot(s) to be improved, the size of the yards and open spaces, existing and proposed streets and alleys adjoining or within the lot(s), and the manner in which the location is to be reprovred. An occupancy permit from the Town of Hudson must be obtained upon completion of improvement.

Signed _____ Signed _____
Owner Authorized Agent

This is to certify that \$25.00 was received this ____ day of _____ for a Location Improvement Permit fee. Receipt No.: _____

The bottom section to be completed by the Zoning Inspector or designee.

Type of Permit:

- House Garage Deck/Porch/Patio
Modular Addition Pond
Mobile Accessory Commercial
Addition Addition Industrial
Other

Size of Structure(s) _____ ft. X _____ ft. Basement ___Yes ___No

Area _____ Sq Ft Bldg Height _____ Ft No. Floors _____

Type of material used: _____

Lot size _____ ft. X _____ ft. Current Zoning Classification: _____

Set Backs:

_____ Ft. from front property line _____ Ft. from right property line
_____ Ft. from rear property line _____ Ft. from left property line

Estimated cost: _____ Estimated completion date: _____

Approved to obtain building permit:

Zoning Inspector or Zoning Administrator Date: _____