

# Henry County Building and Planning Permit Application

All projects that cost **more than \$500** in materials and/or labor are **required** to have a Building and/or Planning Permit.

**ALL** applications are subject to a **minimum 24-hour review**, and may take **up to 10 days** for issuance of a permit. Applications can be mailed, faxed, or emailed into our office.

The Henry County Planning and Building Departments **cannot** issue permits inside the corporate boundaries of these municipalities. You will need to contact them to make sure that you are in compliance with their ordinances.

<b>New Castle</b>	(765) 521-6823	227 N Main St., New Castle, IN 47362
<b>Knightstown</b>	(765) 345-2785	26 S. Washington St., Knightstown, IN 46148
<b>Shirley</b>	(317) 477-1133	111 American Legion Place, Suite 146, Greenfield, IN 46140
<b>Greensboro</b>	(765) 465-1325	PO Box 79, Greensboro, IN 47344
<b>Kennard</b>	(765) 785-2331	PO Box 167, Kennard, IN 47351
<b>Cadiz</b>	(765) 533-6303	1430 N Co Rd 525 W., New Castle IN 47362

All applications for new homes or additions with bedrooms **must** include a **septic permit** from the Henry County Health Department.

All applications for new structures or additions **must** include a **site plan** showing the proposed project in relation to the property lines. Please include proposed dimensions of the structure and distances from property lines and other structures. The site plan does not need to be professionally done or to scale.

**We accept credit & debit cards, checks, money orders, or exact amount in cash. There is a 3% fee for processing credit/debit cards.**

*All permits are final, no refunds are given.*

I UNDERSTAND AND AGREE TO ABOVE: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Printed name: \_\_\_\_\_

Date / Received by \_\_\_\_\_

Permit # \_\_\_\_\_

Reviewed \_\_\_\_\_

# HENRY COUNTY DEPARTMENT OF BUILDING

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1201 Race Street, Suite 210  
New Castle, IN 47362  
765-529-7408  
Fax 765-521-7072  
abarnard@henrycounty.in.gov

## PERMIT APPLICATION

*Please Print*

ALL applications are subject to a minimum 24-hour review

OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ESTIMATED COST OF CONSTRUCTION: \$ \_\_\_\_\_

SITE ADDRESS OF PROJECT: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOTE:** Per State and County Code, this office has up to ten (10) days to issue a permit.

*All building permits are non-refundable.*

Date / Received by \_\_\_\_\_

Permit # \_\_\_\_\_

Reviewed \_\_\_\_\_



# NOTICE OF ASSESSMENT REGISTRATION

State Form 786 (R3 / 6-16)

DEPARTMENT OF LOCAL GOVERNMENT FINANCE

Number	Date (month, day, year)
County	

**INSTRUCTIONS:** An owner of real property, or the owner's agent, is required to file this notice with the County Assessor before demolishing, structurally modifying, or improving the property, unless the demolition, structural modification, or improvement: (1) requires a permit from the state or a political subdivision or (2) costs \$500 or less for materials or labor, or both. Any owner who fails to file this notice when required is subject to a civil penalty of \$100 (see IC 6-1.1-5-15)

AMONG THE ITEMS SUBJECT TO THIS NOTICE ARE:
<ul style="list-style-type: none"> <li>• Construction or placement of building, swimming pool, or other yard structure</li> <li>• Horizontal or vertical extension of building, including extensions such as patios.</li> <li>• Major remodeling, including finishing of attic or basement.</li> <li>• Addition (<i>not replacement</i>) of fireplace, central air conditioning, central heating, commercial paving, bath tub, sink, toilet, water heater.</li> </ul>

BASIC INFORMATION	
Name of registrant	Telephone number (     )
Address of registrant (number and street, city, state, ZIP code)	
Name of landowner	Telephone number (     )
Address of landowner (number and street, city, state, ZIP code)	

LOCATION OF REAL PROPERTY					
Section	Township	Range	Lot	Block	Subdivision or addition
County road or street				City	Parcel number

DESCRIPTION OF DEMOLITION, STRUCTURAL MODIFICATION, OR IMPROVEMENT
<hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/> <hr style="border-top: 1px dashed black;"/>

**ESTIMATED COST INFORMATION IS CONFIDENTIAL PER IC 6-1.1-35-9.**

ESTIMATE		
Cost of materials and labor	Commencement date (month, day, year)	Completion date (month, day, year)
Signature of registrant		Date signed (month, day, year)

# HENRY COUNTY DEPARTMENT OF BUILDING

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tgreen@henrycounty.in.gov

## NOTICE TO HOMEOWNER AND/OR BUILDER

### REQUIRED INSPECTIONS

Be advised that failure to have a "footer" and/or " hole" inspected before pouring concrete **will result** in homeowner or builder tearing out the cement for inspection.

Required inspections must be done as per applicable code. Failure to have inspections performed may result in a "STOP WORK" order being issued and or Occupation Certificate not being issued. Failure to have inspections may result in fines being assessed.

DATE: \_\_\_\_\_

SIGNATURE OF OWNER or BUILDER \_\_\_\_\_

Date / Received by \_\_\_\_\_

Permit # \_\_\_\_\_

Reviewed \_\_\_\_\_