

TOWN OF WINFIELD
10645 Randolph St.
Winfield IN 46307
219-779-9073



MAINTENANCE/REPAIR PERMIT APPLICATION

SECTION 1: PROPERTY/OWNER INFORMATION

JOB ADDRESS: _____ WINFIELD IN 46307 LOT # _____

SUBDIVISION NAME: _____ ZONING: _____

OWNER NAME: _____

OWNER ADDRESS (if different than above): _____

OWNER PHONE #: _____ E-MAIL: _____

PARCEL I.D. #: _____ RECORDED BOOK AND PAGE: _____

SECTION 2: PERMIT TYPE

Building Exterior Material Change/Siding

Deck Repair/Porch*

HVAC

Downspouts/Fascia/Gutters

Plumbing

Windows/Doors

PROPOSED MAINTENANCE (if not listed above): _____

Roof Type: EXISTING or NEW

SQ. FT:

TEAR OFF or COVER OVER

*NOTE: If you are **repairing a deck**, please ensure that it appears on drawings and site plans with measurements, along with spacing and support system. It must also appear on the Plat of Surveys with measurements.

SECTION 3: BUILDING DATA

Estimated Construction Cost \$ _____



| |
|-----------------------------|
| SECTION 4: AGREEMENT |
|-----------------------------|

CONSTRUCTION SITE:

You are responsible for keeping your construction site, as well as the surrounding area, clean from any construction debris. This includes, but is not limited to, mud and/or debris left on the street from vehicles entering and leaving the job site. Also, you must provide traffic control when construction vehicles are blocking streets and traffic is being visually impaired.

INSPECTIONS/RE-INSPECTIONS:

We do not schedule inspections; it is first come/first call basis. Inspections can be called in until 12:00 p.m. (noon) for same day inspections. The Inspector has up to 48 hours to inspect the work. We do not schedule inspections days in advance. We do schedule concrete inspections no more than 36 hours in advance.

RED TAGS FOR FAILED INSPECTIONS MUST BE PAID BEFORE A RE-INSPECT CAN BE COMPLETED.

ELECTRICAL CODE, if required:

Electrical work will be enforced by using HE 2008 National Electrical Code and the 2003, International Residential Code with 2008 Indiana State Approved amendments.

The information contained in the attached building permit and plan application with all attached exhibits, is to the best of my (our) knowledge and belief, true and correct.

The applicant hereby agrees to abide by and comply with all building and health laws of the State of Indiana, and the zoning, building and registration ordinances of the Town of Winfield, Indiana, and furthermore understands that deviations from or violations of these laws and ordinances or conditions as from the provisions of these laws and ordinances or conditions as stated herein shall constitute a basis for revocation of this permit.

INITIAL: _____



SECTION 5: CONTRACTORS

All applicable trades must be licensed with the Town of Winfield

1. Owner and/or Contractor are responsible for verifying that proposed construction complies with any 'restrictive covenants', if applicable
2. Once the permit has been released, if a change is made in a subcontractor of any trade, the General must notify the Building Department (in writing) and a new affidavit must be filed by the new contractor. **FAILURE TO DO SO WILL RESULT IN ORDINANCE VIOLATION FINES AND A 'STOP WORK ORDER'.**
3. Permit is valid for six-months, from the date of issuance. Renewals must be made prior to expiration date and in compliance with the ordinance.

_____ Initial that all above was read

*General, Electrical, Plumbing, and Mechanical/HVAC contractors must submit affidavits before a building permit will be accepted for review.

| TOWN REG # | TRADE | COMPANY | PHONE # |
|------------|---------------------------|---------|---------|
| | *GENERAL | | |
| | *ELECTRICIAN | | |
| | *PLUMBER | | |
| | *MECHANICAL/HVAC | | |
| | CARPENTRY | | |
| | CARPENTRY (TRIM) | | |
| | CONCRETE | | |
| | CRANE OP (N/I EXCAVATING) | | |
| | DRAINAGE | | |
| | DRYWALL | | |
| | EXCAVATOR | | |
| | FIREPLACE | | |
| | GARAGE DOOR(S) | | |
| | INSULATION | | |
| | LANDSCAPING | | |
| | MASONRY | | |
| | PAINTING | | |
| | ROOFING | | |
| | SEWER/WATER | | |
| | SIDING | | |
| | STEEL FABRICATOR | | |
| | WELL DRILLER | | |
| | OTHER | | |
| | OTHER | | |



SECTION 6: GENERAL OR SUBCONTRACTOR AFFIDAVIT

(submit scope of work and/or homeowner signed agreement of work to be completed)

PART 1: IDENTIFICATION

WINFIELD CONTRACTOR REG # _____

PROJECT ADDRESS: _____ Winfield, IN 46307 LOT # _____

SUBCONTRACTOR BUSINESS NAME: _____

MAILING ADDRESS: _____
(street) (town) (state/zip)

PHONE # _____ E-MAIL: _____

WORK PERFORMED: _____

PART 2: AFFIDAVIT

The undersigned subcontractor verifies:

1. The general or subcontractor is registered contractor in the Town of Winfield and the information in this document is true.
2. The general or subcontractor is actually performing the work and/or through his/its employees
3. The general or subcontractor hereby agrees to abide by and comply with all building ordinances, codes, and health laws of the Town of Winfield and State of Indiana, furthermore understands that any deviations from or violations of these laws and ordinances or conditions as stated herein shall constitute a basis for revocation of this permit.

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)
)

Subcontractor Printed Name

Subcontractor Signature

SEAL:

NOTARY PRINTED NAME: _____

NOTARY SIGNATURE: _____

RESIDENT OF COUNTY OF: _____ STATE OF _____

My Commission Expires: _____



SECTION 7: HOMEOWNER'S AFFIDAVIT

(only complete this page if the Homeowner is completing the work)

DATE: _____

PART 1: IDENTIFICATION

ADDRESS: _____ Winfield IN 46307 LOT # _____

Owner mailing address (if different than above):

_____ State _____ Zip Code _____
Street address

PHONE #: _____ E-MAIL: _____

WORK PERFORMED: _____

PART 2: AFFIDAVIT

The undersigned homeowner verifies:

1. **The homeowner(s) is performing the work personally.**
2. The homeowner hereby agrees to abide by and comply with all building ordinances, codes, and health laws of the Town of Winfield and State of Indiana, furthermore understands that any deviations from or violations of these laws and ordinances or conditions as stated herein shall constitute a basis for revocation of this permit.

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)
)

Homeowner Printed Name

Homeowner Signature

SEAL:

NOTARY SIGNATURE: _____

RESIDENT OF COUNTY OF: _____ STATE OF _____

My Commission Expires: _____