



CITY of MARION

ADVISORY PLAN DEPARTMENT

Date _____

Residential Improvement Location Permit Application

ILP # _____

	APPLICANT		LOT OWNER
First/Last Name			
Mailing Address			
City/State/Zip Code			
Phone #			

Address at Job Site _____ Zoning District _____

Is there a nearby tile, open ditch or stream: Yes No Distance _____ Flood District _____

Type of Improvement: _____

Estimated Cost of Proposed Improvement: _____

Are Proposed Improvements and Property Lines Clearly Marked or Staked: Yes No

Manufacture or Modular Type Construction Enter Information Below

Model _____ Make _____ Year _____

Applicant Certification

"I hereby certify that to my best knowledge, the information provided herein is true and correct. I certify that the property owner has authorized me to apply for this permit and that I will inform the owner of the permit conditions. I understand that if I knowingly provide any false information herein, I am subject to any penalties which ordinance or law prescribes. I verify that the building(s) being constructed will be used for residential use only. I understand commercial/industrial uses are prohibited. I assume responsibility for being aware of restrictive covenants (plat or deed), which may effect this proposed improvement. I know that all structures that are authorized with this permit must be completed before the certificate of occupancy will be issued. I recognize that I have one year to start this improvement. If I do not start within this one year time frame than the permit is void." I hereby certify that I have the authority to make the foregoing application and that the application and accompanying floor plan are correct and that all construction will comply with all ordinances currently adopted by the City of Marion and any applicable State and Federal regulations. I know that all structures that are authorized by this permit must be completed before the Certificate of Occupancy will be issued. I further certify that the construction will not be used and or occupied in any manner until all inspections have been made and the City of Marion Advisory Plan Office has issued a certificate of occupancy.

Applicant Signature _____ Date _____

Released for Construction by: _____ Date _____

ILP Fee: _____ Building Permit Fee: _____ Total Fees: _____ Receipt #: _____

ILP Residential- Square Footage: \$30 Base Rate + \$.04 per square feet of building *ALL FEES NON-REFUNDABLE*	\$30.00 MIN.	\$500.00 MAX.
---	-----------------	---------------

FOR OFFICE USE ONLY

Lot or Tract Sizes	Proposed	Required	PLAN COMPLIES/ DOES NOT COMPLY	Initial Field Check	Compliance Review
Width					
Depth					
Area					
Proposed Improvement					
Front Yard SB					
Right Side SB					
Left Side SB					
Rear Yard SB					
Basement					
Height					
Dimensions					
Total Ground Cover					
% of Lot Cover					
ON SITE PARKING # of Spaces					
Total lot size					
Number of Entrances					
Entrance width					
Aisle width					
Loading Berths Number					
Size					
Setback					
Display					
Buffering Size					
Type					
Parking lot setback					
Fencing Type					
Height					
Corner Vision Clearance					