



City of Angola Permit Information

210 North Public Square
Angola, IN 46703
Ph: 260-665-2514
Fax: 260-665-9164
planning@angolain.org

Office Use Only
Date Rec'd: _____
Rec'd by: _____
Zoning: _____

Contact Information

Applicant/Owner Information

Name: _____

Address: _____

Phone: _____

Email: _____

Preferred Contact Person and method: _____

Contractor Information (if applicable)

Name: _____

Address: _____

Phone: _____

Email: _____

Project Information

Project Name (if applicable): _____

Project Location: _____

Subdivision (if applicable): _____

Lot Number (if applicable): _____

Project Description: (i.e. new construction, addition, remodel, parking lot, sign, fence, etc.)

Estimated Start Date: _____ Estimated Completion Date: _____

Total Land Area Disturbed: _____

Total Square feet to be Constructed/Remodeled: _____

Requires new utility (water or sewer) connection: Yes No

Please provide the following information or include a site plan of your construction improvements.

Distance of Structure from Property Line(s): Front: _____ Side: _____ Rear: _____

Width of Structure: _____ Length of Structure: _____

Number of Stories/Height: _____ Number of Rooms: _____

Number of Existing Structures on Property: _____ Lot Coverage: _____

Estimated Construction Cost: _____

Comments: _____

Additional Information

Please include the following for timely review:

Detailed Drawing of your improvements

Site Plan (showing your improvements on your property & distances from property lines)

Construction Plans & Details

*This information will be reviewed by permitting department and you will be contacted as soon as possible.

Signature: _____ Date: _____