

LaGrange County Planning Commission
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LaGrange, IN 46761
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**APPLICATION / REVIEW FOR AN IMPROVEMENT LOCATION PERMIT /
ZONING COMPLIANCE CERTIFICATE # 20-ZC-_____**
****IN L-1 ZONING DISTRICTS ADDITIONAL INFORMATION IS REQUIRED****

Date: _____

Parcel ID #: _____

Land Owner Name _____

Phone _____ Email Address _____

Land Owner Address _____

Site Location Address _____

Section, Twp and Range _____

Acreage / Lot Size _____ Proposed Development: _____

Contractor's Name _____ Zoning: _____

-----OFFICE USE ONLY-----

Planning / Zoning Review Date _____ Initials _____

Setbacks- Front _____ Side _____ Side _____ Rear _____

Called: _____ Message: _____

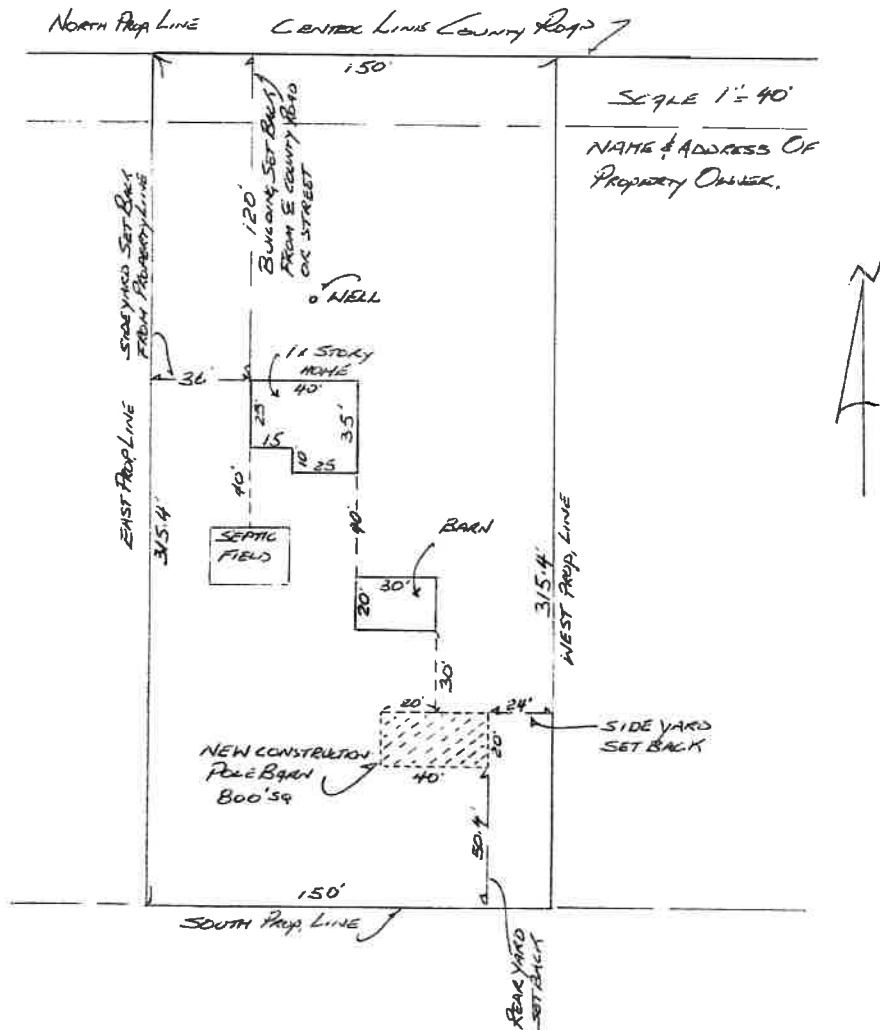
Date Issued: _____ Receipt # _____

Site Plan Requirements

AT MINIMUM, USE A RULER AND SHOW DIMENSIONS OF ALL SETBACKS, LOT LINES AND BUILDINGS,
ILLEGIBLE SITE PLANS ARE NOT ACCEPTABLE.

WHAT MUST BE SHOWN:

- 1. North Arrow
- 2. Property lines and dimensions of the property
- 3. All adjacent edge of rights-of-way, public rights-of-way and their names
- 4. Existing and proposed structures, their sizes and distance from property lines and edge of right-of-way
- 5. Structures, signs or screening (fences, trees, etc.) proposed to be demolished or removed
- 6. Existing and proposed location of well or septic areas



The submitted site plan is a fair and accurate representation of my property and petition.

Land Owners Name: _____

Date: _____

THIS SITE PLAN MUST ACCOMPANY YOUR APPLICATION. IF THE APPLICATION DOES NOT INCLUDE THE COMPLETED SITE PLAN, IT WILL BE CONSIDERED INCOMPLETE AND THE STAFF WILL NOT ACCEPT THE APPLICATION.

MORE DETAILED DRAWINGS MAY BE REQUIRED IN ORDER TO APPLY FOR A BUILDING PERMIT.