

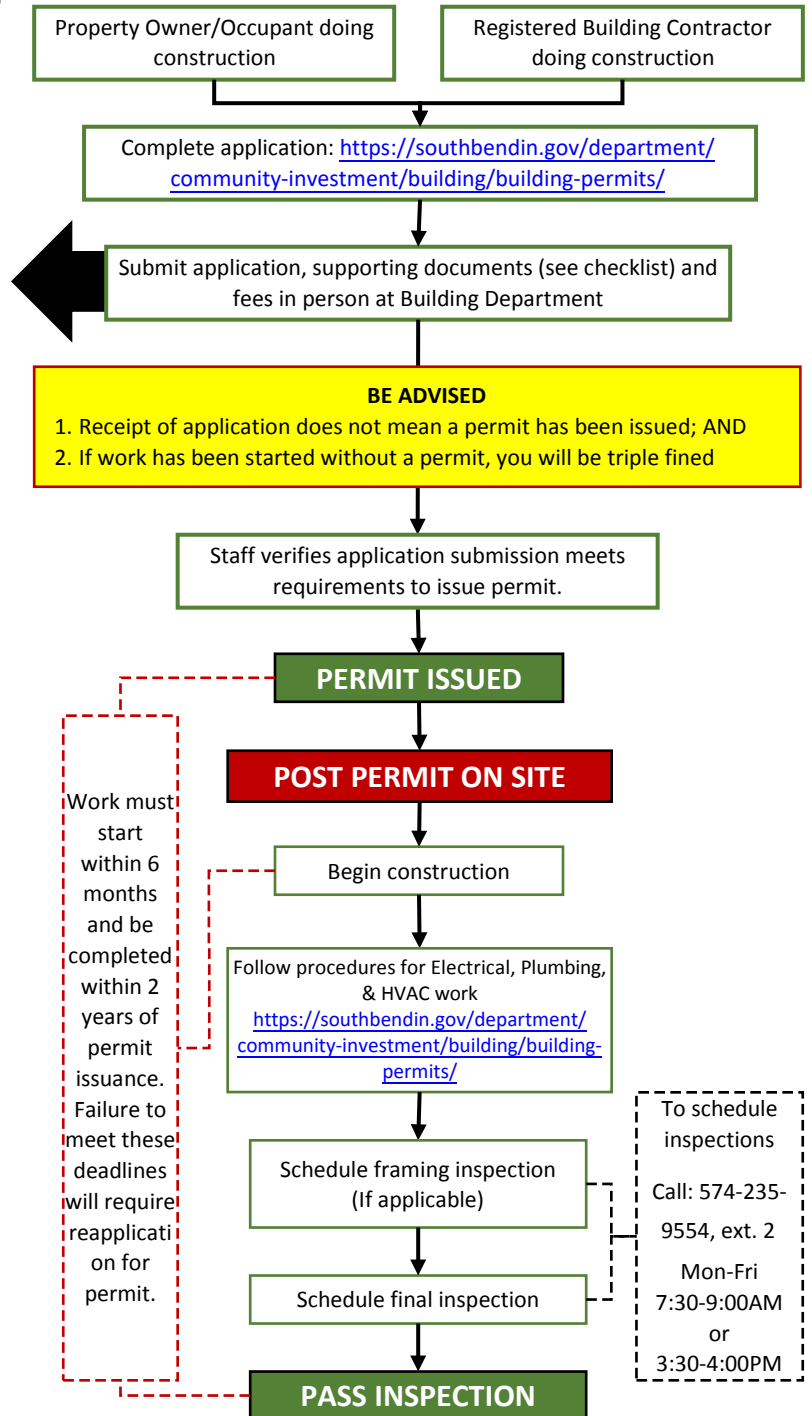
St. Joseph County | City of South Bend
BUILDING DEPARTMENT
CITY WINDOWS/DOORS PERMIT APPLICATION

CITY WINDOWS/DOORS PERMIT CHECKLIST

- 1. Completed Application
- 2. Special use/exception and/or variance approvals if applicable
- 3. Signed contract showing estimated cost of construction
- 4. All contractors involved in the project-building, electrical, plumbing, and HVAC. (on application form)
- 5. Energy Code Certification, if applicable
- 6. ***Elevation plans showing Transparency, including window dimensions** (2nd story, towards front/corner of lot, closing or altering the size of existing windows)
- 7. Application fee ****SEE FEE SCHEDULE FOR APPLICABLE PERMIT FEES**

USEFUL LINKS

- ✓ Residential Permitting Steps
<https://southbendin.gov/wp-content/uploads/2018/07/RESIDENTIAL-PERMITTING-PROCESS-1.pdf>
- ✓ City of South Bend Zoning/Variance Applications
<http://southbendin.gov/zoning>
- ✓ Historic Properties
<https://stjocogis.maps.arcgis.com/apps/PublicInformation/index.html?appid=fe6f472405f14b468e2f983c83ecbba1>





CITY WINDOWS/DOORS PERMIT APPLICATION
 ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

PAYMENT: _____
 CHECK # _____
 CARD _____
 CASH _____

**PROPOSED
 PROJECT
 ADDRESS:**

_____ Address _____ City _____ Zip _____ Township

PROPERTY OWNER: _____

PHONE NUMBER: _____ **EMAIL:** _____

MAILING ADDRESS: _____ Address _____ City _____ State _____ Zip _____

****IF THE PROPERTY OWNER WILL NOT BE PERFORMING THIS WORK AND A CONTRACTOR IS BEING HIRED, SIGNED CONTRACT SHOWING COST OF CONSTRUCTION MUST BE PROVIDED UPON APPLICATION SUBMITTAL****

***TOTAL COSTRUCTION COST: \$**

If adding square footage, please also complete Addition or Accessory Application listing Construction Cost

DUE TO FIRE DAMAGE: YES NO DUE TO STORM DAMAGE: YES NO

SCOPE OF PROJECT:

WINDOWS- REPLACEMENT ONLY? YES NO

DOORS- REPLACEMENT ONLY? YES NO

***IF YOU ARE CLOSING OFF OR ALTERING THE SIZE OF ANY EXISTING WINDOWS/DOORS FACING THE FRONT AND/OR CORNER OF LOT, BE SURE TO PROVIDE ELEVATION PLANS SHOWING TRANSPARENCY**

DOES THIS PROJECT INCLUDE ANY WORK IN THE BASEMENT? YES NO

***IF YES, WILL AN EGRESS WINDOW BE INSTALLED AS A PART OF THIS RENOVATION? YES NO**

***IF NOT, PLEASE INITIAL THAT AN APPROPRIATE MEANS OF EGRESS ALREADY EXISTS WHERE APPLICABLE**

OWNER CONTRACTOR
INITIALS



CITY WINDOWS/DOORS PERMIT APPLICATION

ST. JOSEPH COUNTY | CITY OF SOUTH BEND | BUILDING DEPARTMENT

BUILDING

CONTRACTOR: _____ **OR** **OWNER AS CONTRACTOR**

PHONE: _____ **EMAIL:** _____

ADDRESS:
_____ _____ _____ _____
Address City State Zip

SUB-CONTRACTORS:

Electrical Contractor: _____ **N/A**
Plumbing Contractor: _____ **N/A**
HVAC Contractor: _____ **N/A**

Other: _____	Scope of Work: _____
Other: _____	Scope of Work: _____
Other: _____	Scope of Work: _____
Other: _____	Scope of Work: _____
Other: _____	Scope of Work: _____

***All contractors must be registered with our department. For more information on this go to <https://southbendin.gov/department/community-investment/building/contractor-licenses/>**

***Application can be emailed to us at building@southbendin.gov or provided to the address below for review.**

***Application must be signed below.**

I certify the above to be a true and accurate to the best of my knowledge.

_____ **APPLICANT SIGNATURE**

_____ **DATE**

_____ **PRINT NAME**

_____ **ORG/BUSINESS OR OWNER**

_____ **PHONE**

_____ **EMAIL**