

Township of Indiana

ZONING

PERMIT

NO. _____

Name: _____

Address: _____

Phone: _____ Email: _____

Lot/Block#: _____

Project Description: _____

Setbacks: Front Yard: _____ Side Yards: _____ Rear Yard: _____

Jeffrey S. Curti, Code Enforcement Officer

Property Owner Signature

DATE: ____/____/____