

## CITY OF AURORA PLAN COMMISSION

Department of Planning & Zoning, Suite 300, 165 Mary St., Lawrenceburg, IN 47025  
Phone (812)537-8821 Fax (812)532-2029 Website: [www.aurora.in.us](http://www.aurora.in.us)

# *Improvement Location Permit Instructions*

MINOR PLOT  
PLAN PACKET

## STEP 1: OBTAIN APPLICATION FORMS

All individuals requesting an Improvement Location Permit must submit an ***Improvement Location Permit form*** (Items 1-4 and signature) which will be used (jointly) to determine the location and nature of the proposed improvement. All areas of the applications must be completed accurately, and in their entirety. The applicant is responsible for all the information that is supplied to the Planning & Zoning staff.

## STEP 2: CREATE PLANS

In addition to the completed application form, all individuals requesting an Improvement Location Permit are required to submit a plot plan,\* as required by Chapter 152 of the Zoning Ordinance, and submit all information relevant to proposed signs, including:

- The type of sign
- The location of all existing and proposed signs on the property, including setbacks from the road right-of-way
- The dimensions and computation associated with the total sign area
- The size of the lettering on the signage
- The color scheme associated with the signage
- The height at which the proposed signage will be installed, compared to proposed grade
- The materials associated with each proposed sign
- A description of any lighting / illumination associated with a proposed sign

*\*Please use the attached list of requirements provided for each plot plan type to assist you in creating a plot plan.*

## STEP 3: CHECK OTHER DEPARTMENTS

In order to expedite the required permit process, you may also need to apply for other necessary permits at the same time that the Improvement Location Permit is submitted. A Health Permit and a Building Permit may also be required, depending on the specific request. **The Planning & Zoning Office cannot release the Improvement Location Permit until the necessary Health Permit(s) are released / received.**

## STEP 4: SUBMIT ALL REQUIRED MATERIALS & FEES

All applications must be submitted with the above-referenced forms and a plot plan. At the time that an applicant submits an application for an Improvement Location Permit, the appropriate fees must also be paid. The costs for permits may be found on the current Plan Commission Fee Schedule.

**\*Applications generally take 1-5 business days to process—or more if a C.O.A. is required**

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### Requirements for Minor Plot Plans

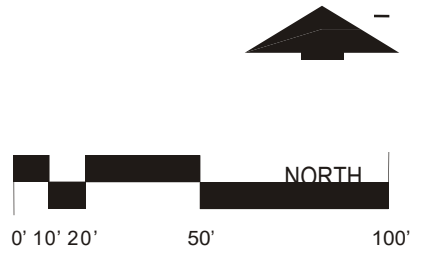
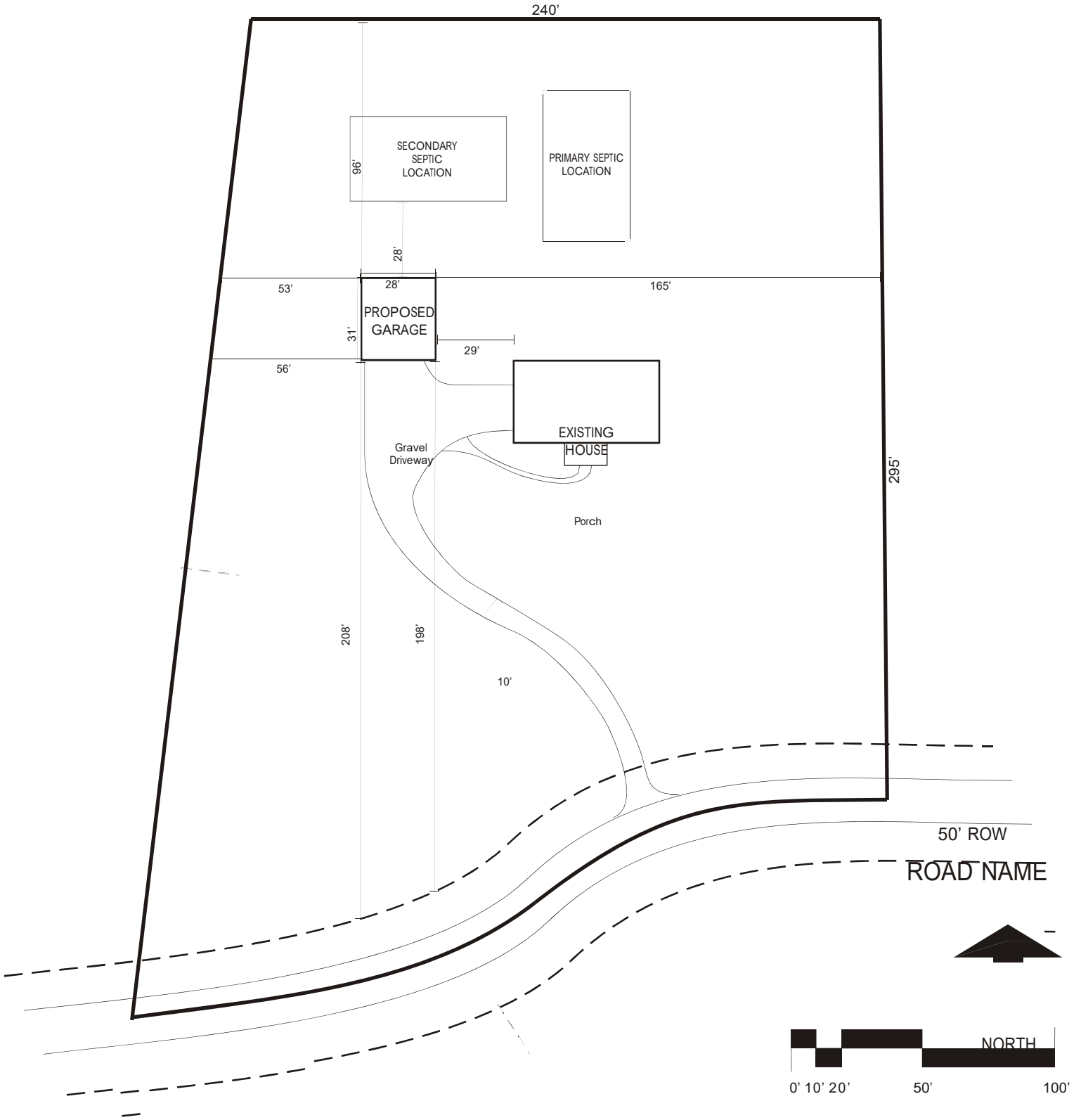
In order that all the required plot plan information be properly documented and correctly designed, it is necessary that *ALL* plot plans be drawn to a scale that allows all improvements and notes to be legible. Digital plans are preferred. **\*\*Paper copies of plans should be submitted on standard paper sizes—either 8 ½ x 11 or 11 x 17. All plans larger than 11 x 17 must be submitted in an acceptable digital format (such as a .jpeg or .pdf file).**

Please check off each item of information that is required to submit to the Department of Planning & Zoning as it is provided below (on the left side of the page). **PLEASE NOTE THAT BEFORE AN APPLICATION CAN BE SUBMITTED, ALL ITEMS MUST BE CHECKED OFF (ON THE LEFT SIDE OF THE TABLE BELOW) OR YOU WILL BE REQUIRED TO RESUBMIT YOUR APPLICATION.**



<input type="checkbox"/>	A complete and accurate application form	
<input type="checkbox"/>	A graphic scale and north arrow	
<input type="checkbox"/>	Label and locate all existing and proposed structures	
<input type="checkbox"/>	Property boundaries / location reference(s)	
<input type="checkbox"/>	Location of all public and private streets and / or private lanes, as well as the location and width of proposed driveway entrances on the subject property	
<input type="checkbox"/>	Exterior dimensions of structure (including decks or porches and overhang measurements)	
<input type="checkbox"/>	Approximate location of all known utilities and associated easements (e.g., sewer lines, water lines, septic tanks, electric lines, gas lines, and so on). <b>*All applicants are advised to call 811, "Call-Before-You-Dig".</b>	
<input type="checkbox"/>	Distances from the corners of the proposed structure(s) to the appropriate property lines—sufficient to determine that all required setbacks, including those from easements and the identified floodplain, have been met. *Setbacks / distances from the proposed improvement(s) to any septic field or tank area within 50 feet must be identified / shown on the plot plan provided to the Department of Planning and Zoning as a part of this process, to illustrate conformance with Chapter 152 of the Zoning Ordinance.	

# MINOR PLOT PLAN EXAMPLE



<b>The Smith Property</b>	
Clay Township	Section 17
	Range 2W
Smith Acres	Map 11-17
Lot 12	Parcel 023.003





**City of Aurora**  
 P.O. Box 158  
 Third & Main Streets  
 Aurora, IN 47001  
 812-926-1777  
 Fax 812-926-0838  
[www.aurora.in.us](http://www.aurora.in.us)

**Planning, Zoning, &  
 Code Enforcement**  
 165 Mary Street  
 Lawrenceburg, IN 47025  
 812-537-8821  
 Fax 812-532-2029  
[dearborncounty.org](http://dearborncounty.org)

# Zoning Application

Permit No. \_\_\_\_\_

Receipt No. \_\_\_\_\_

PERMIT TYPE     Improvement Location Permit     Site Plan Review

### Applicant / Contractor Information

*\*\*Provide preferred method of contact*

Name:	Phone No.	Email
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### SITE INFORMATION

*\*\*Provide preferred method of contact*

Property Owner:	Phone No	Email
Mailing Address:	City:	Zip:
Site Address:	Sec,	Twp (#) ( ) Rng: Acreage:
Parcel No.	Zoning	Subdivision Lot:

### Existing Facilities *(check all that apply)*

Sewer                       Septic                       Public Water                       Well                       Cistern

### Existing Property Use

Vacant Land                       Residential                       Other: \_\_\_\_\_

### PROPOSED IMPROVEMENT(S)

Project Description: _____	
Are living quarters and/or additional bedrooms proposed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Dimensions:    ' -    " x    ' -    "
Proposed Utilities: <input type="checkbox"/> Sewer <input type="checkbox"/> Septic <input type="checkbox"/> Electric <input type="checkbox"/> Water	Square Footage:                      Height to Peak:                      ft.

### FLOOD HAZARD

Is property within a Special Flood Hazard Area (SFHAs)? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is project within 100 feet of a Special Flood Hazard Area (SFHAs)? <input type="checkbox"/> Yes <input type="checkbox"/> No
FIRM Map No.	Base Flood Elevation:

### Staff Comments / Conditions of Approval:

NEW ADDRESS:

Required	Additional Approval	Received
	Health	
	Highway / INDOT	
	BZA / PC	
	Developer / POA	
	State (e.g. Flood)	

**As applicant, I understand that this application and accompanied plans are submitted in accordance with the City of Aurora Code of Ordinances, including the Zoning Ordinance and Subdivision Control Ordinance. I understand that I have no more than ninety (90) days to complete this permit request and acknowledge that incomplete or inaccurate information submitted on my behalf may result in the delay or denial of this application. I hereby grant permission for City staff to enter onto the premises to inspect this site to process and complete this permit request.**

**X**

*Applicant's Signature*

*Date*

**X**

*Planning Official's Signature*

*Date*



**DEARBORN COUNTY  
HIGHWAY DEPARTMENT**

County Highway Building,  
10255 Randall Avenue, Aurora, IN 47001  
Phone: (812) 655-9394 Fax: (812) 655-9424  
Website: [www.dearborncounty.org](http://www.dearborncounty.org)

# Driveway Permit

Permit No. \_\_\_\_\_

Receipt No. \_\_\_\_\_

**Driveway Type**

<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other (*Specify*):
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**Driveway Surface**

<input type="checkbox"/> Concrete	<input type="checkbox"/> Asphalt	<input type="checkbox"/> Gravel	<input type="checkbox"/> Other (*Specify*):	Driveway Width at road: _____	ft.
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**Site Information**

*\*\*Provide preferred method of contact*

Applicant:	Phone No.	Email:		
Property Owner:	Phone No.	Email:		
Site Location:	Sec,	Township (#)	Range:	Acreage:
Property Map No.	Subdivision		Lot:	
Is site within a Special Flood Hazard Area (SFHA)		<input type="checkbox"/> Yes	<input type="checkbox"/> No	FIRM Map No.
Is proposed driveway within 100 feet of a Special Flood Hazard Area (SFHAs)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Base Flood Elev.

**\*\*COUNTY HIGHWAY STAFF SECTION\*\***

**Department of Transportation & Engineering**

Required Culvert Size:	Culvert must be double wall plastic or corrugated metal
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Driveway Installation Requirements:

**Driving Directions (Nearest Address / Road intersection):**

\_\_\_\_\_

<u>Notes:</u>	_____
	Highway Department Official _____ Date _____

**DRIVEWAY PERMIT APPLICATION NOTICE:**

I shall be responsible for the protection of the public and all utilities within the public right-of-way and to any and all installation in, and around, said pavement openings. If work done under this permit involves or endangers structures belonging to others, I shall immediately notify the adjacent property owner(s). At all times during the progress of the work, I shall provide adequate protection and passage for the traveling public. I must fill all pavement openings if they are to be left unattended. I understand that maintenance of the culvert is my responsibility--not the Dept. of Transportation & Engineering--in the event that the pipe becomes non- functioning for any reason. If this is a new driveway, I shall place 2 white flags marked "proposed driveway" at the edge of the road where the driveway is to physically connect with the county road. I understand that the Building Department, to ensure compliance of this permit, will do a final inspection of the driveway. A certificate of occupancy will NOT be issues unless the inspection passes. This permit may at any time be revoked or annulled by the transportation department for non-performance and / or noncompliance. Violations of, or noncompliance of said regulations are subject to penalties provided by law. As applicant, I attest that I have received and reviewed the 'Open Driveway Profile' for proper driveway installation.

**X**  
 \_\_\_\_\_  
*Applicant's Signature* *Date*