

REBUILD LETTER REQUEST
ST. JOSEPH COUNTY/SOUTH BEND BUILDING DEPARTMENT

APPLICANT INFORMATION

DATE: _____

APPLICANT: _____ **ORG/BUSINESS:** _____

PHONE: _____ **EMAIL:** _____

ADDRESS: _____
Address City State Zip

PROPERTY INFORMATION

	1				
	Parcel ID	Address	City	Zip	Township
ADDRESS	2				
	Parcel ID	Address	City	Zip	Township
	3				
	Parcel ID	Address	City	Zip	Township

If you are requesting a rebuild letter for multiple adjacent properties owned by the same person/organization list each parcel. If more than 3 parcels attach a list of the remaining parcels. The properties must all have the same zoning, and same use. Each new zone or use requires a separate application.

CURRENT USE(S)

Current Zoning _____ To verify zoning go to the following link <http://goo.gl/ORcUSH>

Describe the current use(s) of the property. _____

Property meets all development standard requirements of current ordinance. Yes No *If "No" you must be able to check "Yes" to one or both of the following to receive a rebuild letter.*

Has the property been granted a variance and/or special use/exception? Yes No If "Yes" describe. _____

_____ Date Approved

Has a "Certificate of Legally Established Nonconforming Use" been issued for this property? Yes No In progress

_____ Date Approved

Mail or drop off application and fees to the address below. Make checks payable to "St. Joseph County/South Bend Building Department".
ATTN: ZONING & BUSINESS SERVICES ADMINISTRATOR
125 LAFAYETTE BLVD, STE100
SOUTH BEND, IN 46601

APPLICATION CHECKLIST

1. Application
2. Property information for parcels that could not fit on application if applicable
3. Site plan verifying set backs
4. Fees: \$50.