



ILOA

Indian Lake Owners Association

P O Box 808 Smithville, TX 78957 / (512)237-8500

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Residential New Construction & Addition/Alteration Permit Application

ILOA USE ONLY Chair Init. _____ Date: _____

Min. Requirements : Y / N Approval PENDING BCDS : Y / N

B	Construction Permit	Y / N / NA	Culvert Permit	Y / N / NA
C				
D				
S	Septic Permit	Y / N / NA	911 Address	Y / N / NA

PROPERTY OWNER INFORMATION: _____ (please print) **DATE:** _____

NAME: _____

MAILING ADDRESS: _____

PHONE #: HOME: _____ BUS: _____ CELL: _____

PROPERTY DESCRIPTION: _____ **BCAD**

SECTION: _____ LOT NUMBER(S): _____ PROPERTY ID #(S): R _____

STREET ADDRESS: _____

DEVELOPMENT INFORMATION:

CONSTRUCTION TYPE: SITE-BUILT ADDITION MODULAR MOBILE/MANUFACTURED

FOUNDATION: SLAB PIER CRAWL SPACE CONCRETE RUNNERS OTHER _____

DIMENSIONS: LENGTH: _____ WIDTH: _____ SQ FEET: _____ # Stories: _____

MAKE MODEL SIZE: YEAR: _____ MAKE: _____ MODEL: _____ SINGLE WIDE DOUBLE WIDE
(mobile/mfg home only)

OTHER CLASSIFICATIONS:

PARKING: GARAGE CARPORT RV CARPORT **SIZE:** LENGTH: _____ WIDTH: _____ SQ FT: _____

ACCESSORY: STORAGE BUILDNG POLE BARN GAZEBO **SIZE:** LENGTH: _____ WIDTH: _____ SQ FT: _____

OTHER: DECK: SQ FT: _____ PORCH: SQ FT: _____ PIER: SQ FT: _____

FENCE: MATERIAL _____ LENGTH: _____ WIDTH: _____ ROOF REPLACEMENT

CONTRACTOR: _____

DAYTIME PHONE #: _____

This application must be accompanied by a detailed drawing of proposed property improvement and must show relation to lot lines, utility easements and existing structures. A copy of either (1)Construction Permit, (2)Septic System Permit; (3) Culvert Permit or (4) 911 Address Permit from Bastrop County must be included as applicable. NOTE - all 4 Bastrop County Development Services Permits must be obtained for a home, whether new construction or mobile/manufactured. All improvements must comply with ILOA Deed Restrictions.

AN ILOA PERMIT WILL NOT BE GRANTED WITHOUT OBTAINING THE APPROPRIATE BCDS APPROVED PERMIT(S)

Exterior construction must be completed within 6 months (interior - 8 months) of issue of this permit or permit is void.

ACKNOWLEDGEMENT - Read and acknowledge

I certify that all information, statements & documents provided are true & correct to the best of my knowledge. Should development be altered, I agree to submit a revised application & immediately cease development until further notice by ILOA. I hereby grant ILOA access to the identified property for site, development & compliance inspections.

DATE

DATE

APPLICANT SIGNATURE

ARCHITECTURAL CONTROL COMMITTEE SIGNATURE

APPLICANT PRINTED NAME

ARCHITECTURAL CONTROL COMMITTEE PRINTED NAME