

**APPLICATION FOR PLUMBING PERMIT
CITY OF ZION, ILLINOIS
BUILDING DEPARTMENT
(847) 746-4018**

JOB LOCATION: Number and Street: _____

LEGAL DESCRIPTION: Lot _____ Block _____ Section _____ Township _____
46 North, Range 12 East of the Third Principal Meridian, Lake County, Illinois Zoning district: _____

PROPERTY OWNER: _____ PHONE: (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

GENERAL CONTRACTOR: _____ PHONE: (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PLUMBING CONTRACTOR: _____ PHONE: (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

STATE OR CHICAGO LICENSE NUMBER: **058-**_____

PLEASE INDICATE THE NUMBER OF FIXTURES:

_____ Kitchen sink	_____ Slop sink
_____ Toilet bowl	_____ Lavatory
_____ Urinal	_____ Bath tub
_____ Shower bath	_____ Sprinkler head
_____ Laundry tub	_____ Hot water heater (expansion tank required)
_____ Water softener	_____ Floor drain
_____ Sump pump	_____ Check valve

REPAIR DETAILS AND/OR OTHER DETAILS OF CONSTRUCTION:

TOTAL ESTIMATED VALUE OF WORK, COMPLETED: \$ _____

If no work is performed hereunder within six months from the date a permit is issued or if the work is not completed within one year from the date a permit is issued, the plumbing permit shall expire by limitation as provided by City code. The undersigned applicant agrees to comply with all provisions of the plumbing ordinance of the City of Zion and with the provisions of all other law relating to the erection, repair, and alteration of buildings in effect at the date of the permit issued hereunder. The said applicant herewith agrees not to make any changes in the plans or specifications, as approved, without first obtaining further approval for such changes from the building inspector.

Signature of Licensed Plumber

Date

(for office use only)

PERMIT NO. **PL-17-**_____

DATE PERMIT ISSUED: _____

PERMIT FEE: _____