

APPLICATION FOR BUILDING PERMIT

CITY OF ZION, ILLINOIS

BUILDING DEPARTMENT

Phone (847) 746-4018 fax: (847) 746-4665

JOB LOCATION: Number and Street: _____

P.I.N. _____ USE TYPE: single family, duplex, business, other _____

ZONING DIST. _____ LEGAL DESCRIPTION: Lot _____ Block _____ Section _____

Township 46 North, Range 12 East of the Third Principal Meridian, Lake County, IL

PROPERTY OWNER: _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

GENERAL CONTRACTOR: _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

ROOFING CONTRACTOR: _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

ILLINOIS STATE ROOFING LIC. NUMBER: **104**-_____

ARCHITECT: _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

DETAILS FOR CONSTRUCTION

FOR NEW CONSTRUCTION ONLY:

Number of stories and height _____

Total number of rooms _____

Number of bedrooms _____

Number of bathrooms _____

Total square footage _____

Size of basement _____

Roofing material _____

Type of heating system _____

GARAGE:

Attached or detached: size _____ X _____

Total square footage _____

ADDITION:

Total square footage _____

MISCELLANEOUS: REPAIRS/REMODELING

Roofing _____

Siding _____

Shed: total square footage _____

Fence _____ Deck: _____

Driveway _____

Windows U-Factor _____

Other: _____

DEMOLITION:

Principal building _____

Accessory building _____

TOTAL ESTIMATED VALUE OF WORK, COMPLETED: \$ _____

If the work is not started within six months from the date the permit is issued or if the work is not completed within one year from the date a permit is issued, the building permit shall expire by limitation as provided by City code. The undersigned applicant agrees to comply with all provisions of the building code and the zoning ordinance of the City of Zion and with the provisions of all other law relating to the erection, repair, and alteration of buildings and to zoning 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 Applicant

DATE

(for office use only)

PERMIT NO. **BD**- _____ - _____

DATE PERMIT ISSUED: _____

Building permit \$ _____

Plan review \$ _____

Other Permits \$ _____

Engineering review \$ _____

Other fees \$ _____

Fine \$ _____

TOTAL FEES: \$ _____

Certificate of Occupancy \$ _____