

## INSPECTION SERVICES DIVISION

# APPLICATION FOR BUILDING PERMIT

Permit No. \_\_\_\_\_ Date Issued \_\_\_\_\_

ALL INFORMATION REQUESTED MUST BE COMPLETED ON THIS APPLICATION

Application is hereby made for a Building Permit and a Certificate of Occupancy as required under the Building Code and Zoning Ordinance of the City of Joliet for the erection, moving, or alteration, and use of buildings and premises. In making this application the applicant represents all the following statements and any attached maps and drawings as a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit applied for, if granted, is issued on the representations made herein and that any permit issued may be revoked without notice on any breach of representations or conditions.

1. ADDRESS OF PROPOSED CONSTRUCTION: \_\_\_\_\_
2. PIN #/OR ATTACH LEGAL DESCRIPTION: \_\_\_\_\_  
Property located in \_\_\_\_\_ Zoning District. Floodplain? Yes \_\_\_\_\_ No \_\_\_\_\_
3. PROPOSED CONSTRUCTION:  
A. ( ) New Building; B. ( ) Alterations/Additions to existing building; (C) Other: \_\_\_\_\_
4. USE OF EXISTING & PROPOSED STRUCTURES:

Existing Use: \_\_\_\_\_  
(single-family home, grocery, factory, etc.)

Proposed Use: \_\_\_\_\_

5. PLANS AND SPECIFICATIONS REQUIRED:

- A. Building, Electrical, Plumbing and HVAC plans must be submitted.
- B. Please attach a plat of the lot or parcel of land.
- C. Finished grade above crown of street (in inches) \_\_\_\_\_ Will premises be connected with sewer & water? \_\_\_\_\_  
Frontage sidewalk must be completed on completion of building. Sidewalk Contractor \_\_\_\_\_
- D. Specifications. For each building, structure, or use (existing and proposed (identified on plat) give the following:

PROPOSED STRUCTURE	Height in Feet	No. of Stories	Overall Dimensions	No. of Dwelling Units	No. of Rooms	Material of Foundation	Material of Walls	Parking Spaces	Material of Roof	Footing (inches)	Overhang (inches)

BUILDING DEPARTMENT MUST BE NOTIFIED OF ANY CHANGE IF ANY CHANGE OF PLANS IS MADE

6. HEATING AND A/C \_\_\_\_\_ UNITS

Hot Water	Hot Air	A/C
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7. ILLINOIS ROOFING LICENSE NO. \_\_\_\_\_ Expiration Date \_\_\_\_\_

8. NAMES OF THE FOLLOWING ARE REQUIRED:

Architect \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone # \_\_\_\_\_

Owner's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_

Heating Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone # \_\_\_\_\_

General Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_

Electrical Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone # \_\_\_\_\_

9. ESTIMATED VALUATION OF CONSTRUCTION \$ \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

10. PLEASE NOTE THE FOLLOWING:  
Footing forms, framing and completed building must be inspected.

Construction Water \$ \_\_\_\_\_

Twenty-four (24) hours' notice required for ALL INSPECTIONS.

Sidewalk \$ \_\_\_\_\_

NO storm or surface water to be emptied into sanitary sewers.

Drive(s) \$ \_\_\_\_\_

11. Concrete Contractor Name & Num. \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

\_\_\_\_\_  
Director/Inspection Division

_____ Building Approved by	_____ Date	_____ Plumbing Approved by	_____ Date
_____ Wiring Approved by	_____ Date	_____ Heating Approved by	_____ Date
_____ Building Safety Approved by	_____ Date	_____ Zoning Approved by	_____ Date