

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:

| | 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 (in inches) |
|--------------------|----------------|----------------|--------------------|-----------------------|--------------|------------------------|-------------------|----------------|------------------|------------------|----------------------|
| PROPOSED STRUCTURE | | | | | | | | | | | |

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 |
|-----------|---------|-----|

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.

Driveway \$ _____

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 _____