



IL UNIFORM PERMIT APPLICATION

PERMIT NO. _____

TAXKEY# _____

ISSUING MUNICIPALITY

Village of PEOTONE

PROJECT LOCATION
(Building Address)**PROJECT DESCRIPTION** COMMERCIAL ONE & TWO FAMILY

Subdivision Name _____

Lot No. _____

Block No. _____

Lot Area _____

Sq. Ft.

Owner's Name _____

Mailing Address _____

Telephone - Include Area Code _____

(Home)

(Work)

General Contractor (Lic. No.) _____

Mailing Address _____

Telephone - Include Area Code _____

Carpenter (Lic. No.) _____

Mailing Address _____

Phone _____

Plumber (Lic. No.) _____

Mailing Address _____

Phone _____

Electrician (Lic. No.) _____

Mailing Address _____

Phone _____

Heating (Lic. No.) _____

Mailing Address _____

Phone _____

BUILDING or REMODELING: PERMIT(S) INCLUDE: Construction Electrical Plumbing HVAC Erosion Zoning

Types of Rooms:

 DRIVEWAY SIGN wall ground illuminated non-illuminated width _____ length _____ area _____ ht. above ground _____ lot frontage _____ FENCE length _____ height _____ type _____ OTHER (specify) _____**1a. PROJECT** New Addition Raze Alteration Repair Move Other _____**3. TYPE** Single Family Two Family Multi _____**6. ELECTRICAL**Entrance Panel Size: _____ amp Service: Underground Overhead**9. HVAC EQUIPMENT** Forced Air Furnace Radiant Baseboard or Panel Heat Pump Boiler Central Air Conditioning OtherFuel _____ Space Htg. _____ Water Htg. _____
Nat. Gas Electric Other _____**1b. GARAGE** Attached Detached**4. CONST. TYPE** Site Constructed Manufactured**7. FOUNDATION** Concrete Masonry Treated Wood Other _____**10. PLUMBING**Sewer Municipal Septic Permit No. _____**13. NUMBER OF BEDROOMS****2. AREA** Office Use Only_____ Sq. Ft.
_____ Sq. Ft.
_____ Sq. Ft.
_____ Sq. Ft.**5. STORIES** 1-Story 2-Story Other _____**8. USE** Seasonal Permanent Other _____**11. WATER** Municipal Utility Private On-Site Well**14. NUMBER OF BATHS****15. ESTIMATED COST**

\$ _____

TOTAL _____

No error or omission in either the plans or application, whether said plans or application has been approved by the building inspector or not shall permit or relieve the applicant from constructing the work in any other manner than that provided for in the ordinances of this municipality relating thereto. The applicant having read this application and fully understanding the intent thereof declares that the statements made are true to the best of my knowledge and belief.

SIGNATURE OF APPLICANT _____ PRINT NAME _____ DATE _____

CONDITIONS OF APPROVAL

This permit is issued pursuant to the adopted building & zoning ordinances and the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. _____

Building Footing Foundation Rough Insulation Bsmt. Fl. Final Electric Rough Service Final
Plumbing Rough Underfloor OS Sewer Water Final HVAC Rough Final**FEES:****RECEIPT****PERMIT EXPIRATION:****PERMIT ISSUED BY MUNICIPAL AGENT:**

Building Fee _____

Sub Total _____

CK # _____

Permit expires

Electric Fee _____

Admin. Fee _____

Amount \$ _____

one year from

Plumbing Fee _____

Bond _____

Date _____

date issued

HVAC Fee _____

Other _____

From _____

unless otherwise

Other _____

Total _____

Rec By. _____

noted below:

Name _____

Date _____

APPLICATION FOR BUILDING PERMIT

NAME OF OWNER: _____ DATE: _____ PHONE: _____

ADDRESS: _____ CONSTRUCTION SITE ADDRESS: _____

EMAIL ADDRESS: _____

DESCRIPTION OF IMPROVEMENT: _____

VALUE OF CONSTRUCTION: _____ ZONING: _____

CONTRACTORS:

- 1. GENERAL: _____ LIC#: _____
- 2. EXCAVATING: _____ LIC#: _____
- 3. CONCRETE: _____ LIC#: _____
- 4. ROOFER: _____ LIC#: _____
- 5. FRAMER: _____ LIC#: _____
- 6. SEWER: _____ LIC#: _____
- 7. WATER: _____ LIC#: _____
- 8. PLUMBING: _____ LIC#: _____
- 9. ELECTRIC: _____ LIC#: _____
- 10. HVAC: _____ LIC#: _____
- 11. PAINTER: _____ LIC#: _____
- 12. MASONRY: _____ LIC#: _____
- 13. ASPHALT: _____ LIC#: _____
- 14. LANDSCAPER: _____ LIC#: _____
- 15. OTHER: _____ LIC#: _____

OFFICE USE ONLY:

- LIBRARY FEE RECEIPT YES ___ NO ___ AMT _____
- SCHOOL FEE RECEIPT YES ___ NO ___ AMT _____
- PARK DIST. FEE RECEIPT YES ___ NO ___ AMT _____
- FIRE DIST. FEE RECEIPT YES ___ NO ___ AMT _____

ONE CHECK FOR:

- SIDEWALK ESCROW \$ _____
- OCCUPANCY ESCROW (PER DU) \$500(R) \$1000(C)

ONE CHECK FOR:

- DEVELOPMENT FEES: \$ _____

ONE CHECK FOR:

- BUILDING PERMIT FEE \$ _____
- BUILDING INSPECTION FEE \$ _____
- OCCUPANCY PERMIT (PER DU) \$25(R) \$100(C)
- GRADING SURVEY FEE \$225.00

JULIE MUST BE CALLED BEFORE EXCAVATING 1-800-892-0123

ALL THE SUPPLIED INFORMATION ABOVE IS TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE. ANY DEVIATION OR CHANGES TO THE INFORMATION PROVIDED ABOVE WILL BE BROUGHT TO THE ATTENTION OF THE VILLAGE OF PEOTONE.

APPLICANT SIGNATURE

DATE