CALL
847-233-1246
SAFEbuilt, Inc.

IL UNIFORM PERMIT APPLICATION

PERMIT NO.

TAXKEY#

ISSUING MUNICIPALITY

☐ TOWN ☐ VILLAGE ☐ CITY

_____

PROJECT LOCATION (Building Address)

PROJECT DESCRIPTION

☐ COMMERCIAL ☐ ONE&TWOFAMILY

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 _____

1b. GARAGE

☐ Attached ☐ Detached

2. AREA *Office Use Only*

_____ Sq. Ft.
_____ Sq. Ft.
_____ Sq. Ft.
_____ Sq. Ft.

TOTAL _____

3. TYPE

☐ Single Family
☐ Two Family
☐ Multi
☐ _____

4. CONST. TYPE

☐ Site Constructed
☐ Manufactured

5. STORIES

☐ 1-Story
☐ 2-Story
☐ Other _____

6. ELECTRICAL

Entrance Panel Size:_____ amp
Service:
☐ Underground
☐ Overhead

7. FOUNDATION

☐ Concrete
☐ Masonry
☐ Treated Wood
☐ Other _____

8. USE

☐ Seasonal
☐ Permanent
☐ Other _____

9. HVAC EQUIPMENT

☐ Forced Air Furnace
☐ Radiant Baseboard or Panel
☐ Heat Pump
☐ Boiler
☐ Central Air Conditioning
☐ Other

10. PLUMBING

Sewer
☐ Municipal
☐ Septic
☐ Permit No. _____

11. WATER

☐ Municipal Utility
☐ Private On-Site Well

12. ENERGY SOURCE

Fuel	Space Htg.	Water Htg.
Nat. Gas	☐	☐
Electric	☐	☐
Other	_____	_____

13. NUMBER OF BEDROOMS

14. NUMBER OF BATHS

15. ESTIMATED COST

$

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 inthe 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 one year from date issued unless otherwise noted below:	Name _____
Electric Fee _____	Admin. Fee _____	Amount $_____		Date _____
Plumbing Fee _____	Bond _____	Date _____		
HVAC Fee _____	Other _____	From _____		
Other _____	Total _____	Rec By. _____		

White - Municipal Files
NorthIL12.16

Yellow - IIL Office

Pink - Clerk/Assessor