

TYPE II & III

ZONING

APPLICATION FOR REGULATORY PERMIT

PERMIT #

DUPAGE COUNTY DEPARTMENT OF ECONOMIC DEVELOPMENT AND PLANNING

DATE

421 North County Farm Road, Wheaton, IL 60187

TRACKING #

(630) 407-6700

APPLICATION IS HEREBY MADE FOR PERMISSION TO CONSTRUCT: (Print description of work to be done.)

(Please check the item that applies)

Commercial

Residential

Please tab to each line

Form with three columns: SQUARE FEET OF NEW (living area, basement, etc.), NUMBER OF NEW PLUMBING FIXTURES (bathtubs, showers, etc.), and NUMBER OF BEDROOMS (existing, new, TOTAL). Includes a sub-section for COMMERCIAL/INDUSTRIAL with wire circuit options.

Check two that apply to property:

- Well, Septic, Water, Sewer

ELECTRICAL SERVICE SIZE:

- new, existing

Was property recently RED TAGGED [] No [] Yes Date of Red Tag

Applicant's estimated cost of new construction: \$ Existing construction: \$

Owner Phone Fax

Address City Zip

Construction Address: P.P.N. #

Table titled 'CONTRACTORS' with columns for NAME and REGISTRATION #. Lists various trades such as Architect, HVAC, Insulation, etc.

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the Ordinances of DuPage County. I realize that the information that I have affirmed hereon forms a basis for the issuance of the building permit herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any provision of any Ordinance of DuPage County or to excuse the owner or his successors in title from complying therewith. Where no work has been started within ninety (90) days after the issuance of a permit, or when more than ninety (90) days lapses between required inspections, such permit shall be VOID. No work shall commence prior to issuance of permit.

Owner Signature Date: Applicant Signature Phone # Fax #

For Office Use Only:

County's estimated cost of new construction: \$ Existing construction: \$
Permit Fee \$ Drainage \$ Fire \$
Plan Review \$ Fence \$ Alarm \$
Plumbing Fee \$ Sign \$ Suppression \$
Electrical Fee \$ Ex/Fill \$ Total Fee \$
Use/Occupancy \$ Other \$ App Fee Pd \$ -
Balance Due \$

House # Subdivision Lot Block
Permit Technician Township Fire District

RECEIPT HEREBY ACKNOWLEDGED AND PERMIT AS CHECKED HEREBY AUTHORIZED BY:

Zoning Approval Date Building Official Date

INSPECTIONS MUST BE SCHEDULED TWENTY-FOUR (24) HOURS IN ADVANCE
MONDAY - FRIDAY BETWEEN THE HOURS OF 8:00 A.M. - 4:00 P.M. at (630) 407-6700