For office use only
Permit #
Bldg. Fee \$

# IROQUOIS COUNTY PLANNING & ZONING 1001 EAST GRANT STREET WATSEKA, IL 60970

815-432-6978 FAX 815-432-6999

# APPLICATION

for an Iroquois County Building Permit (For any building or structure or alteration of existing building or structures.)

Note: Permit will not be issued unless total application is completed and a set of plans submitted.

under Item 5 below.			g premises legally described
Owner of Property:			
Name			
Address			
		_ Telephone	
Mail permit to			
Legal description of propert	ty. (Property	Tax Identification	n Number & Legal Descriptio
# of acres	Townshin		Section
911 address of property	_ 10 wiisiiip		
Is property in Floodplain?	Vec		No No r flood insurance premium.
	e 11 1	1	
Type of Construction: stic	ek		
Type of Construction: stic	ek		year of modular
Type of Construction: stic		_ modular	year of modularPole
	(circle one)	_ modular ICC approved	year of modular Pole HUD approved
<b>Desc</b> New Building Improv	(circle one) cription of Provement to exist	modular ICC approved roject: (circle or sting building	HUD approved  ne)  Manufactured Home
<b>Desc</b> New Building Improv	(circle one) cription of Provement to exist	modular ICC approved roject: (circle or sting building	year of modular Pole HUD approved ne) Manufactured Home
New Building Improv Other Will building have electrica	(circle one) cription of Provement to exist	modular ICC approved roject: (circle or sting building Will building	year of modular Pole HUD approved ne) Manufactured Home ng have plumbing?
New Building Improv Other_ Will building have electrica	(circle one) cription of Provement to exist the constant of th	modular ICC approved roject: (circle or sting building Will building	year of modular Pole HUD approved ne) Manufactured Home ng have plumbing?
New Building Improv Other Will building have electrica Total estimated cost of the Name, address and telephor	(circle one) cription of Provement to exist the constant of th	ICC approved roject: (circle or sting building Will building ruction \$	year of modular Pole HUD approved ne) Manufactured Home ng have plumbing?
New Building Improvement of the Mame, address and telephor General Contractor	(circle one) cription of Provement to exist the constant of th	modular  ICC approved  roject: (circle or sting building  Will building  ruction \$	year of modular Pole HUD approved ne) Manufactured Home ng have plumbing?
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New Building Improvements Other Will building have electrica Total estimated cost of the Name, address and telephor General Contractor Sub-Contractor Concrete Contractor	(circle one) cription of Provement to exist the constant of th	modular  ICC approved roject: (circle or sting building  Will building ruction \$	year of modular Pole HUD approved ne) Manufactured Home ng have plumbing?

# **IMPORTANT** REQUIRED DATA ON PLOT PLAN SKETCH

- State if your facility is existing or proposed. A.
- В. Lot size, building dimensions and location with all set-backs.
- C. Indicate North direction.
- Indicate Location of road or roads. D.
- Indicate well and septic locations. E.

### **SUPPLY COMPLETE INFORMATION**

### Locate Building on Lot By Dimensions to Lot Lines.

Survey stakes must be in place at property corners. Location of building or structure must be staked out on property as shown. (Construction must not be started until permit is issued. No changes in location as shown may be made without first contacting Building Department.)

Locations as shown below will be staked out by \_\_\_\_\_

(Date)

## REMEMBER TO CALL J.U.L.I.E. (800-892-0123)BEFORE DIGGING

### PLOT SKETCH

### **MISCELLANEOUS INFORMATION - BUILDINGS**

Give total number of square feet in overall area of each floor and basement, including breezeways, garages,

porches, etc. Basement\_\_\_\_ Square Footage Garage Square Footage 1st Floor\_\_\_\_\_ Square Footage Other\_\_\_\_\_Square Footage 2nd Floor Square Footage TOTAL Square Footage Rent \_\_\_\_\_ Sell Owner will: Occupy Number of Rooms\_\_\_\_\_\_Number of Bathrooms\_\_\_\_\_ Basement: Yes No Finished \_\_\_\_ Unfinished Approximate Date Work is Expected to Start: **Description of Building** Brick Veneer Frame Pole Concrete Block Cinder Block Stone Veneer Stucco Foundation Poured Block Pole 
 Heating
 \_\_\_\_\_\_ Hot Water
 \_\_\_\_\_\_ Electric
 \_\_\_\_\_\_ Warm Air

 Oil Burner
 \_\_\_\_\_\_ Steam
 \_\_\_\_\_\_\_ Gas
 RoofingAsphalt ShingleWood ShingleAsbestos ShingleBuilt-Up \_\_\_\_\_Metal Slate Fiberglass Shingles I/we hereby agree to reimburse the County for Building Permit Review fees if in fact this becomes necessary.

In consideration of this application and attached forms being made a part thereof, and the issuance of permit, I/we will conform to the regulation set forth in the Iroquois County Building Ordinances. I/we also agree that all work performed under said permit will be in accordance with the plans and plot diagram which accompany this application, except for such changes as may be authorized or required by the Building Officer. Iroquois County has adopted the International Building Code, National Electrical Code and State Plumbing Code.

There will be a FINE of \$50.00 per day for moving in without Occupancy Permit.

Signature of Owner or Authorized Agent