



Village of South Chicago Heights

BUILDING PERMIT APPLICATION

PERMIT EXPIRES ONE YEAR FROM DATE ISSUED

CASELLE PERMIT NUMBER #	ISSUE DATE:	TOTAL PERMIT FEE \$
PERMIT # <small>(To be completed by the Village)</small>		<small>(To be completed by the Village)</small>

NO.# 1 PROPERTY OWNER INFORMATION

Address of Work:		<small>Please check to indicate the primary contact for this permit application.</small>	<input type="checkbox"/>	Owner
Property Pin #:			<input type="checkbox"/>	General Contractor
Owner's Name:		Email:		
Address:		Phone #:		

NO.# 2 GENERAL CONTRACTOR INFORMATION

PERMIT FOR: <small>(circle one)</small>	Residential // Commercial // Industrial // New Structure // Addition // Garage // Demo
General Contractor Name:	
Business Address:	
Business Phone #:	Business Email:

NO.# 3 Estimated Value of Work \$

<u>Detailed Scope of Work:</u>	

NO.# 4 ARCHITECT & CONTRACTORS INFORMATION

Any sole proprietor, partnership, corporation or organization contracting or subcontracting to perform construction within the Village of South Chicago Heights must be listed on this building permit application and must comply with the Village's licensing and bond requirements.

Architect - Business Name:	Contact Name:
Business Address:	Trade/License #:
Phone #:	Email:
Plumbing Contractor's Name:	Contact Name:
Business Address:	Trade/License #:
Phone #:	Email:
Electrician's Name:	Contact Name:
Business Address:	Trade/License #:
Phone #:	Email:
Roofing Contractor's Name:	Contact Name:
Business Address:	Trade/License #:
Phone #:	Email:
Masonry Contractor's Name:	Contact Name:
Business Address:	
Phone #:	Email:

NO.# 5 APPLICANT'S SIGNATURE

The undersigned hereby applies to the Building Department of the Village of South Chicago Heights, Illinois for a permit to erect, alter, construct, or enlarge the structure described, and if granted the permit applied for I will comply with all requirements of the Village of South Chicago Heights Code of Ordinances relating thereto by such ordinances, including but not limited to paying the fees required and requesting necessary inspections.

Print Applicant's Name:	Signature of Applicant:	Date:
<i>Additional forms or handouts may be required.</i>		

NO.# 6 VILLAGE APPROVAL *(Below to be completed by Village staff only)*

Receipt hereby acknowledged. Permits and Plans checked & Permit maybe issued.

Special Instructions/Notes:

3317 Chicago Road,
South Chicago Heights, Illinois 60411
(708) 755-1880

Director's Name: Nicholas J. Goncher	Signature of Director:	Date:
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