

DEKALB COUNTY PLANNING DEPARTMENT
110 East Sycamore Street
County Administration Building
Sycamore, IL 60178
Phone No. (815) 895-7188
FAX No. (815) 895-1669

OFFICE USE ONLY

Permit No. _____
 Fee _____
 Receipt No. _____
 Zoning Dist: _____
 911 Address: _____
 Site Dev. Permit Required Y/N _____

Application for a County Building Permit

Note: If improvements are made by the property owner, or if the structure is a commercial, industrial, or multi-family structure; a licensed/registered plumber and electrician is required to do the work.

Application is hereby made for a building permit involving premises described under item 7 below.

Date of Application _____

Applicant _____

Address _____ City _____ Zip _____

Telephone Number _____

Interest in Property: Owner _____ Contractor _____ Other _____

Owner of Record _____

Location of Property _____

Parcel Number _____

Existing Uses of Property _____

<p><u>Type of Improvement</u> (Please Check):</p> <p>___ New Structure</p> <p>___ Addition</p> <p>___ Alteration</p> <p>___ Repair/Replacement</p> <p>___ Moving/Relocating</p> <p>___ Electrical Only</p> <p>_____ Other</p> <p>Ownership:</p> <p>___ Private ___ Public</p>	<p><u>Proposed Use:</u></p> <p><u>Residential</u></p> <p>___ One Family</p> <p>___ Deck</p> <p>___ Fence</p> <p>___ Attached Garage</p> <p>___ Detached Garage</p> <p>___ Other (specify below)</p> <p>_____</p>	<p><u>Non-Residential Use</u></p> <p>___ Amusement/Recreational</p> <p>___ Church/Other Religious</p> <p>___ Industrial</p> <p>___ Service Station/Repair</p> <p>___ Hospital/Institutional</p> <p>___ Office/Bank/Professional</p> <p>___ Public Utility/Tank/Towers</p> <p>___ School/Library/Educational</p> <p>___ Stores/Mercantile</p> <p>___ Other _____</p>
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Estimated value of Improvement (Rounded to the nearest \$100) _____

SEPTIC PERMIT

ACCESS PERMIT

Give the total square footage of each floor and basement area, including breeze ways, garages, porches, etc.

Basement _____ sq. ft.

Garage _____ sq. ft.

Other _____ sq. ft.

1st Floor _____ sq. ft.

Deck _____ sq. ft.

Determined by project at office:

Plumbing _____

2nd Floor _____ sq. ft.

Porch _____ sq. ft.

Electrical _____

Mechanical _____

Height (Fences and Accessory Buildings Only): _____

TOTAL FEE AMOUNT \$ _____

Please provide the names, addresses and telephone numbers of the following (if applicable):

General Contractor

Plumbing Contractor (include License #)

Phone: # _____

Phone # _____ License # _____

Registration# _____

Framer/Carpenter

Electrical Contractor (include License #)

Phone # _____

Phone # _____ License # _____

Concrete Contractor

HVAC/Mechanical Installer

Phone # _____

Phone # _____

Roofing Contractor

Architect

Phone # _____ License # _____

Phone # _____

The authorized applicant/property owner's signature below hereby attests the following:

- 1.) All information contained in the application and on any accompanying documents are true and correct.
- 2.) Proposed construction will not take place on any granted easement, public or private, nor violate and covenant or restriction applicable to the subject property.
- 3.) Applicant/Owner and any contractors will conform to the regulations set forth in the **DeKalb County Planning, Zoning and Building Ordinances**.
- 4.) All work performed under said permit will be in accordance with the plans and plat diagram which accompany this application, except for changes as may be authorized by the Building Inspector.
- 5.) Applicant/Owner is aware that inspections will be required and that all necessary inspections will be conducted in accordance with the "Required Inspections" procedure sheet accompanying this application.
- 6.) The permit will become **null and void** if work or construction authorized is not commenced within 180 days.
- 7.) The permit will become null and void if no inspections are scheduled or conducted at least every 180 days.
- 8.) Work will not commence until permits issued. Permit fee will **DOUBLE** if work is started without first obtaining permit.

Signature of Owner or Agent

Date

Received By

SITE PLAN

THE FOLLOWING INFORMATION MUST BE INCLUDED ON THE SITE PLAN BELOW:

NOTE: If located within a subdivision, the site plan needs to be drawn on a plat of survey.

1. Lot size and dimensions.
2. Name and location of all roads abutting property.
3. Structures on property (existing and proposed).
4. Front, side and rear yard setbacks (number of feet between the lot line and structure(s)).
5. Number of feet between all structures on the lot.
6. Please indicate north by an arrow.

STAKE OUT DATE _____