

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

<b>OFFICE USE ONLY</b>
Permit No. _____
Fee _____
Receipt No. _____

**Application for a County Plumbing Permit**

**Note: A plumbing permit may only be issued to a homeowner who is making improvements to his own property. If the property owner is not making his own improvements, or if the structure is a commercial, industrial, or multi-family structure, than a licensed/registered plumber is required to do the work.**

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

1. Date if application \_\_\_\_\_
2. Applicant \_\_\_\_\_
3. Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
4. Telephone Number \_\_\_\_\_
5. Interest in Property Owner \_\_\_\_\_ Contractor \_\_\_\_\_ Other \_\_\_\_\_
6. Owner of Record \_\_\_\_\_
7. Location of Property \_\_\_\_\_  
\_\_\_\_\_
8. Parcel Number \_\_\_\_\_
9. Existing Uses of Property \_\_\_\_\_

<b>Nature of Proposed Plumbing and No. of fixtures:</b>	
Tub and/or Shower _____	Mop Sink _____ Dishwasher _____
Clothes Washer _____	Floor Drains _____ Water Closets _____
Kitchen Sink _____	Garbage Disposal _____ Water Conditioner _____
Water Heater _____	Lavatories _____ Laundry Sink _____
Other _____	Total Number of Fixtures _____

10 Estimated value of Improvement (Rounded to the nearest \$100) \_\_\_\_\_

FEE MUST ACCOMPANY APPLICATION

