

BUILDING PERMIT APPLICATION



VILLAGE OF OAKWOOD HILLS
3020 North Park Drive
Oakwood Hills, Illinois 60013
Phone: (815) 444-9435
Fax: (815) 444-9436

PERMIT # \_\_\_\_\_ ISSUED: \_\_\_\_\_
TOWNSHIP: \_\_\_\_\_ ZONING: \_\_\_\_\_
SECTION: \_\_\_\_\_ TWP: \_\_\_\_\_ RGE: \_\_\_\_\_
LEGAL DESC. LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_
SUBDIVISION: \_\_\_\_\_ ACTIVE: \_\_\_\_\_

Owners Name: \_\_\_\_\_
Address: \_\_\_\_\_
City/State/Zip: \_\_\_\_\_
Phone: \_\_\_\_\_
E-Mail: \_\_\_\_\_

Contractors Name: \_\_\_\_\_
Address: \_\_\_\_\_
City/State/Zip: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
E-mail: \_\_\_\_\_

Complete the following information which applies for the proposed work

Address of Construction: \_\_\_\_\_ PIN #: \_\_\_\_\_
Describe Proposed Work: \_\_\_\_\_ Cost of Construction \$ \_\_\_\_\_

TYPE OF BUILDING: [ ] Single Family [ ] Two Family [ ] Multi Family [ ] Office [ ] Commercial [ ] Manufacturing
[ ] Misc: Describe: \_\_\_\_\_ Use: \_\_\_\_\_ Type of Construction: \_\_\_\_\_

BUILDING: [ ] New [ ] Addition [ ] Alteration [ ] Repair [ ] Demolish Stories: \_\_\_\_ Ht: \_\_\_\_ Wth: \_\_\_\_ Lth: \_\_\_\_

Number of Rooms: \_\_\_\_ Bedrooms: \_\_\_\_ Baths \_\_\_\_ Total Sq. Ft. \_\_\_\_\_ [ ] Basement (Sq. Ft. \_\_\_\_\_) [ ] Crawl [ ] Slab

Garage: \_\_\_\_ car [ ] Attached [ ] Detached [ ] Acc. Building Total Sq. Ft. \_\_\_\_\_

ELECTRICAL: Service Size \_\_\_\_\_ amp [ ] Underground [ ] Overhead [ ] Conduit

HVAC: [ ] Forced Air [ ] HWH BTU Input: \_\_\_\_\_ [ ] Gas [ ] Elec. KW: \_\_\_\_\_ [ ] A/C BTU Input: \_\_\_\_\_ [ ] Fireplace

PLUMBING: No. of Plumbing Fixtures: \_\_\_\_ [ ] Sewer/Septic [ ] Private Well [ ] New [ ] Replacement

McHenry County Approval Permit #: \_\_\_\_\_ FENCE: Ht: \_\_\_\_ Lin. Ft.: \_\_\_\_\_ Type of Fence: \_\_\_\_\_

ARCHITECT: ADDRESS: PHONE:
ENGINEER: ADDRESS: PHONE:
EXCAVATOR: ADDRESS: PHONE:
CONCRETE: ADDRESS: PHONE:
CARPENTRY: ADDRESS: PHONE:
ROOFER: ADDRESS: PHONE:
STATE LICENSE #:
PLUMBER ADDRESS: PHONE:
STATE LICENSE #:
HVAC CONTR: ADDRESS: PHONE:
ELECTRICIAN: ADDRESS: PHONE:
MASON: ADDRESS: PHONE:
SEPTIC: ADDRESS: PHONE:
WELL: ADDRESS: PHONE:
BLACKTOP: ADDRESS: PHONE:

The owner/applicant agrees to comply with the requirements of the Village of Oakwood Hills, Illinois, and with the conditions of the permit. All work will be performed under this permit in accordance with the approved plans which accompanied this application. Any changes from the plans shall be authorized and approved by the Building Official. The building will be used for (i.e. Residence, Office, Factory, etc.) \_\_\_\_\_. If the title to the real estate is held by an Illinois land trust and the applicant named in this application is not the Trustee, the applicant represents and warrants to the Village that the applicant holds and owns the entire power of direction to said land trust.

Signature of Owner/Authorized Agent: \_\_\_\_\_ Application Date: \_\_\_\_\_

FEES

Plan Review: \$ \_\_\_\_\_
Permit Fee: \$ \_\_\_\_\_
Penalty: \$ \_\_\_\_\_
Contribution: \$ \_\_\_\_\_
Total: \$ \_\_\_\_\_

PERMIT ISSUED

\_\_\_\_\_  
Building Official, Village of Oakwood Hills