### **VILLAGE OF SOUTHERN VIEW**

# APPLICATION FOR PLAN REVIEW AND COMMERCIAL BUILDING PERMIT

PROPERTY INFO	DRMATION
Street Address:	
Zoning Classification	n:
Lot Width	Lot Depth
PROPERTY OWI	NER INFORMATION
Name:	
Street Address:	
City, State, Zip:	
Phone:	Email:
TENANT OF PRO	OPERTY INFORMATION
Name:	
Street Address:	
City, State, Zip:	
Phone:	Email:
TYPE OF CONST	RUCTION
CHECK ALL THAT AP	PLY
( ) New Building	( ) Addition ( ) Alteration ( ) Relocation ( ) Repair ( ) Foundation Only
( ) Demolition	( ) Other – Specify

## **PROPOSED USE**

CHECK ALL THAT APPLY (For demolition choose most recent use of structure)
( ) Amusement/Recreational ( ) Church ( ) Restaurant/Night Club ( ) Business
( ) Stores ( ) Hotel/Motel ( ) Manufacturing ( ) Service
( ) Hospital/HCF/Nursing Home ( ) Other – Specify
V.
SELECTED CHARACTERISTICS OF BUILDING
PRINCIPAL TYPE OF FRAME
( ) Masonry ( ) Structural Steel ( ) Reinforced Concrete ( ) Wood
( ) Other – Specify
EXTERIOR WALLS
( ) Steel ( ) Concrete ( ) Masonry ( ) Wood ( ) Other- Specify
BUILDING DIMENSIONS
Height ft in Length ft in Width ft in
Total Square Feet of Floor Area square feet
Number of Stories (Including those below grade level)Number of off-street parking spaces
PRINCIPAL TYPE OF HEATING FUEL
( ) Gas ( ) Electricity ( ) Solar ( ) Geo Thermal ( ) Other- Specify
COST ESTIMATES
Architectural / Engineering Fees \$
Demolition Costs \$
Electrical Costs \$
Plumbing Costs \$
Mechanical / HVAC \$
Roofing Costs \$
Site Work \$ (including parking lots, storm drains, landscaping, security lighting, etc.)
ESTIMATED TOTAL COST (LABOR & MATERIAL) OF CONSTRUCTION \$

## **PROJECT ARCHITECT & ENGINEER INFORMATION**

Architect Name & Company :	
	Email:
Electrical Engineer Name:	
City, State, & Zip:	
Phone:	Email:
Plumbing Engineer Name:	
Firm/Business Address:	
City, State, & Zip:	
Phone:	Email:
Mechanical Engineer Name:	
Firm/Business Address:	
City, State, & Zip:	
Phone:	Email:
CONTRACTOR INFORMATION	
GENERAL CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Email:
ELECTRICAL CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Fmail:

PLUMBING CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Email:
MECHANICAL/HVAC CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Email:
ROOFING CONTRACTOR NAME:	
Business Address:	
Phone:	Email:
ADDITIONAL CONTRACTOR NAME:	
Business Address:	
Phone:	Email:
ADDITIONAL CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Email:
ADDITIONAL CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Email:
ADDITIONAL CONTRACTOR NAME:	
Business Address:	
City, State, & Zip:	
Phone:	Fmail:

#### CERTIFICATION

I hereby certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable federal, state, and local laws. In addition, if a permit or work described in this application is issued, I certify that the building official or the building official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. Further, I understand and agree to the following: (1) All permits are subject to any existing easements; (2) The Village does not investigate for easements as part of the permit review process; (3) It is the sole responsibility of the applicant and owner to notify the Village of any and all easements in the project area, including those easements held by the Village; and (4) Issuance of a permit does not in any way validate the suitability of the land for the proposed project. Applicant and owner are responsible for soil compaction and mine subsidence research. For more information, contact the Illinois Department of Natural Resources at 217-782-0588, or visit their website at <a href="http://dnr.state.il.us/mines/lrd/swq.htm">http://dnr.state.il.us/mines/lrd/swq.htm</a>

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

****ASBESTIS & LEAD PAINT AWARENESS NOTICE FO	OR DEMOLITION & RENOVATION PROJECTS ****
The Illinois Environmental Protection Agency (IEPA) rethe IEPA a minimum of ten working days prior to de Department of Public Health (IDPH) requires that but renovation activities. I hereby certify that I have reprotection Agency (EPA) handout entitled "Common file the ten day NOTIFICATION OF DEMOLITION AND hereby certify that I have received and read the Abatement Project Notification Form", and that I understand that the EPA and IDPH handouts may not I agree to conform to all applicable federal, state and 2011 and the IDPH at 217-782-3517	molition or renovation activities. Also, the Illinois ilding owners and contractors notify IDPH prior to ceived and read the United States Environmental Questions on the Asbestos NESHAP" and that I will DIRENOVATION with the IEPA if applicable. I also DPH handout entitled "State of Illinois Asbestos will file the form with the IDPH if applicable. I describe all of the IEPA and IDPH requirements, and
Contractors and property owners of rental property phomes, child care facilities, and schools built before 1 work practices to prevent lead contamination. You residents or to the facility operator before work begued to follow these guidelines. For more informatical 1-800-424-5323 or visit <a href="https://www.epa.gov/lead">www.epa.gov/lead</a>	978 must be EPA certified, and must follow specific u must provide the Renovate Right pamphlet to ns. Homeowners performing their own work also
I hereby certify that I will meet all of the above requir	ements.
SIGNATURE OF ARRUCANT.	DATE

All Commercial Building Permit Fees are equal to .002 of the stated project costs or Forty dollars (\$40.00) whichever is greater.

In addition to the Administrative Building Permit Fee, as provided above, every Commercial Building permit applicant shall also be responsible for all plan review and project inspection costs, including, but not limited to, engineering, architectural, inspection and legal costs, related to the project and incurred by the Village of Southern View.

Before a Building Permit may be issued, all permit fees must be received by the Village. On large projects the owner and or owner's representative and Commercial Construction Trustee, should confer prior to and as soon as possible after the building permit application is made to discuss the scope, cost and schedule of construction and building inspections so as to minimize any inconvenience and expense to the owner.

- PLANS MUST ACCOMPANY THIS APPLICATION
- PERMIT MUST BE OBTAINED BEFORE WORK BEGINS
- SUBMISSION OF THIS FORM DOES NOT GUARANTEE OR GRANT PERMISSION TO BEGIN WORK
- ACCEPTANCE OF PAYMENT DOES NOT CONSTITUTE A PERMIT

#### FOR THE VILLAGE OF SOUTHERN VIEW USE ONLY

Permit # : #	
(year) (month) (#) Application Date"	Received By:
Plan Review Fee : \$	(Non-Refundable)
Permit Fee : \$	<u></u>
Fee Total : \$	
Date Permit Issued:	Issued By: Commercial Construction Trustee
Permit Start Date :	Permit Expiration Date:
Denial Date :	
Reason for Denial :	