

VILLAGE OF SOUTHERN VIEW

APPLICATION FOR PLAN REVIEW STRUCTURAL AND BUILDING PERMIT

PROPERTY INFORMATION

Street Address: _____

Zoning Classification: _____

Lot Width _____ Lot Depth _____

PROPERTY OWNER INFORMATION

Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

TENANT OF PROPERTY INFORMATION

Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

TYPE OF CONSTRUCTION

CHECK ALL THAT APPLY

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 _____

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 : _____

Firm/Business Address: _____

City, State, & Zip: _____

Phone: _____ Email: _____

Electrical Engineer Name: _____

Firm/Business Address: _____

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: _____ Email: _____

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: _____

City, State, & Zip: _____

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: _____ Email: _____

ADDITIONAL CONTRACTOR NAME: _____

Business Address: _____

City, State, & Zip: _____

Phone: _____ Email: _____

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 <http://dnr.state.il.us/mines/lrd/swq.htm>

SIGNATURE OF APPLICANT: _____ DATE: _____

****ASBESTOS & LEAD PAINT AWARENESS NOTICE FOR DEMOLITION & RENOVATION PROJECTS ****

The Illinois Environmental Protection Agency (IEPA) requires that building owners and contractors notify the IEPA a minimum of ten working days prior to demolition or renovation activities. Also, the Illinois Department of Public Health (IDPH) requires that building owners and contractors notify IDPH prior to renovation activities. I hereby certify that I have received and read the United States Environmental Protection Agency (EPA) handout entitled "Common Questions on the Asbestos NESHAP" and that I will file the ten day NOTIFICATION OF DEMOLITION AND RENOVATION with the IEPA if applicable. I also hereby certify that I have received and read the IDPH handout entitled "State of Illinois Asbestos Abatement Project Notification Form", and that I will file the form with the IDPH if applicable. I understand that the EPA and IDPH handouts may not describe all of the IEPA and IDPH requirements, and I agree to conform to all applicable federal, state and local laws. The IEPA may be contacted at 217-785-2011 and the IDPH at 217-782-3517

Contractors and property owners of rental property performing work that disturbs lead based pain in the homes, child care facilities, and schools built before 1978 must be EPA certified, and must follow specific work practices to prevent lead contamination. You must provide the Renovate Right pamphlet to residents or to the facility operator before work begins. Homeowners performing their own work also need to follow these guidelines. For more information, contact the National Lead Information Center at 1-800-424-5323 or visit www.epa.gov/lead

I hereby certify that I will meet all of the above requirements.

SIGNATURE OF APPLICANT: _____ DATE: _____