

Village of Winnebago

108 W. Main Street Winnebago, Illinois 61088 (815) 335-2020 FAX (815) 415-8491

BUILDING PERMIT APPLICATION

Permit for the following address: _____ Lot # _____

Applicant's Name: _____ Phone _____

Applicant's Address: _____

Owner's Name: _____ Phone _____

Owner's Address: _____

Plumber: _____ IL Lic. # _____ Electrician: _____

Heating & Cooling: _____ Roofer: _____ Lic. # _____

A. APPLICANT DESIRES TO:

ERECT REMODEL EXTEND REMOVE DEMOLISH USE OCCUPY
 UPGRADE

(DESCRIBE USE) _____ ZONE # _____

C. LOT & BUILDING DESCRIPTION:

Lot Dimensions _____ Corner Lot Interior Lot

Set backs (feet): Front _____ Back _____ Side _____ and _____

Building Construction _____

No. of Family Units _____ Height (stories & feet) _____ Sq. Ft. Living Space _____

Ranch _____ Tri-Level _____ 2-Story _____ Sq. Ft. Up _____ Sq. Ft. Down _____

Basement Unfinished ___ Finished ___ Sq. Ft. _____ Deck Size _____ Porch Sq. Ft. _____

Attached Garage Size _____ Detached Garage/Accessory Building Size _____

Living Room _____ Dining Room _____ Kitchen _____ Family Room _____ Utility Room _____

Number of Bedrooms _____ Number of Bathrooms _____

Heat: Gas ___ Electric ___ Heat Pump ___ BTU ___ No. of Gas Outlets ___ Elec. Serv. ___ AMPS

Structure Value _____

Value of Improvements made _____

BUILDING PLANS MUST BE SUBMITTED WITH YOUR APPLICATION

F. STATE OF ILLINOIS)
 COUNTY OF WINNEBAGO) SS The deponent being duly sworn, says that he is the owner or authorized agent for which the foregoing work is proposed to be done, and that all work will be performed in accordance with all existing State Laws & Local Ordinances.

Applicant's Signature _____

Please Note: No one can occupy a building until all Final Inspections have been completed on said building or addition. The contractor is responsible for calling in all inspections (ie.: structure, electrical service, plumbing etc.) *Failure to comply will result in fines.*

Sworn to this date: _____ 20____

Notary Public _____

PERMITS WILL NOT BE SIGNED OFF UNTIL ALL INSPECTIONS HAVE BEEN COMPLETED. CALL 815-335-2020 TO SCHEDULE INSPECTIONS.

Do not write below this line. For official use only

	First Floor		Second Floor
	Basement		Garage
	Fireplace		Deck
	Porch		

W.M.T		Wtr. Closet		Bath Tub		D. Washer		Altrn.	
Water		Lndry Tray		Lavatory		Kt. Sink		Spr. M.	
Sewer		Washer		Sh. Bath		G. Disposal		Spr. Hd.	
Sump		Water Soft.		Urinal		Fut. Op.		Service Sink	
Floor Drain		Water Htr.		Whirlpool		Dr. Ftn.		Misc.	

G. Action Taken on Above Application

Permit for use [] Approved
 [] Denied. Not in conformance with the following provision(s) of the Zoning Ordinance:

PERMIT NUMBER _____ DATE _____

APPROVED BY _____ TITLE _____