

PERMIT NUMBER \_\_\_\_\_

Date Issued: \_\_\_\_\_

# Village of Hinsdale Community Development Department

19 E. Chicago Ave., Hinsdale, IL 60521  
630-789-7030

Permit Fee: \_\_\_\_\_

## Application for Building Permit

<b>PROPERTY ADDRESS:</b> _____	
<b>LOT DIMENSIONS:</b> Frontage: _____ Depth: _____ Square Feet: _____	
<b>ZONING DISTRICT:</b> _____ <b>P.I.N.:</b> _____	
<b>SINGLE FAMILY:</b> ___ <b>MULTIFAMILY:</b> ___ <b>COMMERCIAL:</b> ___ <b>PUBLIC:</b> ___ <b>OTHER:</b> _____	
<b>Architect/Engineer</b>	<b>General Contractor</b>
Name: _____	Name: _____
Address: _____	<b>LLC#:</b> _____
City, State: _____ Zip: _____	Address: _____
Office #: (____) _____	City, State: _____ Zip: _____
FAX No. (____) _____ Cell: (____) _____	Office #: (____) _____
State Lic. # _____	FAX No. (____) _____ Cell: (____) _____
<b>E-MAIL ADDRESS</b> _____	<b>E-MAIL ADDRESS</b> _____
	<b>ROOFING CONT. IL LLIC#</b> _____
<b>Property Owner</b>	<b>Applicant (if different from owner)</b>
Name: _____	Name: _____
Address: _____	Address: _____
City, State: _____ Zip: _____	City, State: _____ Zip: _____
Office #: (____) _____	Office #: (____) _____
FAX No. (____) _____ Cell: (____) _____	FAX No. (____) _____ Cell: (____) _____
<b>E-MAIL ADDRESS</b> _____	<b>E-MAIL ADDRESS</b> _____

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the applicable ordinances. I realize that the information that I have affirmed heron forms a basis for the issuance of the permit herein applied for an approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any applicable ordinance or to excuse the owner or his successors in title from complying therewith.

\_\_\_\_\_  
Contractor Signature and Date

\_\_\_\_\_  
Owner's Signature and Date

### DESCRIPTION OF WORK

NEW	Alteration	Addition	Repair	Demo
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FOR ADDITIONS	GARAGE SF
Existing SF _____	Demo: _____
Proposed Add. _____	New: _____

Value of Construction: \_\_\_\_\_  
Cubic Feet: \_\_\_\_\_

**Light and Vent required on plans or as attachment to this application.**

-----Items Below For Office Use Only-----

HSD Approval: _____	APP FEE: _____	Contractor Bonds/LOC: _____	Cert of Liability: _____
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### APPROVALS (Office Use Only)

BUILDING	ZONING	PLUMBING	ELECTRIC	ENGINEERING	FLOOD PLAIN	PLANNING
Date/Initials _____	Date/Initials _____	Date/Initials _____	Date/Initials _____	Date/Initials _____	APPLYS Y or N	Date/Initials _____

Date App. Rcvd: \_\_\_\_\_  
Revisions Rcvd: \_\_\_\_\_

**DISPOSITION  
APPROVED/DENIED**

BY: \_\_\_\_\_ Date: \_\_\_\_\_