

NO. _____
OFFICE USE

Date _____

APPLICATION FOR BUILDING PERMIT
VILLAGE OF MATTESON, ILLINOIS
4900 Village Commons (708) 481-8313

(Street Address of Property on Which Improvement Is To Be Made)

COOK COUNTY • RICH TOWNSHIP

Property Index No. _____
Lot _____
Subdivision _____

COMMERCIAL PERMIT

_____ BUILDING PERMIT FEE	\$ _____	WMAF	\$ _____
_____ ELECTRICAL FEE	\$ _____	1-00-258-18	\$ _____ TREE
_____ SEWER INSP. FEE	\$ _____	MECHANICAL	\$ _____
_____ WATER INSP. FEE	\$ _____	FIRE	\$ _____
_____ WATER METER	\$ _____	POLICE	\$ _____
_____ CONSTRUCTION WATER	\$ _____	BOND	\$ _____
_____ PLUMBING FEE	\$ _____	TOTAL AMT.	\$ _____
_____ PLAN REVIEW (Internal)	\$ _____		
_____ PLAN REVIEW (third party)	\$ _____	FLOODPLAIN	YES _____ NO _____

MSD PERMIT ISSUED _____ YES _____ NO PERMIT NO. _____

TYPE OF WORK:

Erection _____ Alteration _____ Addition _____ Repair _____ Demolish _____

PROPOSED USE: Commercial _____ Industrial _____ Public _____

BUILDING – Sq. Feet of Floor Area _____

Size: First Floor _____ X _____ Second Floor _____ X _____

Height _____ Ft. Number of Stories _____

No. of Rooms _____

No. of Bathrooms _____ Full _____ Half _____

Basement: Width _____ Depth _____ Sq. Ft. _____

Central Air Conditioning: Gas _____ Electric _____

Heating: Gas _____ Electric _____ Electric Service _____ Amps _____

Water Service – Copper Size: _____ Meter: _____ Sewer: _____

CONSTRUCTION:

First Floor: Frame _____ Other _____

Second Floor: Frame _____ Other _____

Roof _____ Fireproof _____

Foundation Wall: _____ Width _____ Depth _____

Footing: _____ Width _____ Depth _____

PARKING:

No. of Parking Spaces: _____ Surfacing: _____

Property Owner: _____ /Tenant _____

Present Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

General Contractor: _____

Address: _____ City: _____ Zip: _____

Telephone: _____

Electrical Contractor: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ License # _____

State Licensed Plumbing Contractor: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ Registration # _____

State Licensed Roofing Contractor: _____

Address: _____ City: _____ Zip: _____

Telephone: _____ License # _____

Architect: _____

Address: _____ City: _____ Zip: _____

Telephone: _____

Model or Plan No. _____

LOT: Width _____ Depth: _____ Sq. Ft.: _____

Description of Project: _____

As owner of the property, for which this permit is issued and as the applicant for this permit, I expressly agree to conform to all applicable ordinances, rules and regulations of the Village of Matteson.

OWNERS SIGNATURE/AUTHORIZED AGENT (Mandatory)

Applicant's Signature and Title

Permit Expires One Year From Date Issued.
Construction Must Start within 6 Months of Date Issued.

Permission is hereby granted to the applicant to perform the work described above, provided the permit bears the stamp of the Matteson Building Department.

This permit is issued subject to compliance of the owner and contractor with all Village Ordinances, Laws, rules and regulations of all other jurisdictions and of the utility companies.

CAUTION - INVESTIGATE - ELECTRICITY - GAS - TELEPHONE

Have you checked for: Sewers, Water Mains, Street Lights, and Cables

PAID STAMP

Estimated construction value including all materials and labor \$ _____

Date Approved: _____ By: _____

Date Issued: _____ By: _____