

VILLAGE OF SOUTHERN VIEW

Application for Plan Review and Commercial Building Permit

PROPERTY INFORMATION

STREET ADDRESS: _____

ZONING CLASSIFICATION: _____

LOT WIDTH _____ LOT DEPTH _____

PROPERTY OWNER INFORMATION

NAME: _____

STREET ADDRESS: _____

CITY, STATE & ZIP: _____

PHONE #: _____

E-MAIL: _____

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 / Health Care Facility / 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 DEMENSIONS

Height _____ ft ____ in Length _____ ft ____ in Width _____ ft ____ in

Total Square Feet of Floor Area _____ sq. ft.

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 \$ _____

Electrical \$ _____

Plumbing \$ _____

Mechanical / HVAC \$ _____

Roofing \$ _____

Site Work \$ _____ (Inc. parking lots, storm drains, landscaping, security lighting, etc.)

Estimated total cost (Labor & Material) of construction \$ _____

PROJECT ARCHITECT & ENGINEER INFORMATION

ARCHTTECT NAME: _____
FIRM / BUSINESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
ELECTRICAL ENGINEER NAME: _____
FIRM / BUSINESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
PLUMBING ENGINEER NAME: _____
FIRM / BUSINESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
MECHANICAL ENGINEER NAME: _____
FIRM / BUSINESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____

CONTRACTOR INFORMATION

GENERAL CONTACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
ELECTRICAL CONTRACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
PLUMBING CONTRACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
MECHANICAL / HAVC CONTRACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
ROOFING CONTRACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____
ADDITIONAL CONTRACTOR NAME: _____
BUISNESS ADDRESS: _____
CITY, STATE & ZIP: _____
PHONE #: _____
E-MAIL: _____

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 paint in 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 I will meet all of the above requirements.

SIGNATURE OF APPLICANT _____ DATE _____

All Commercial Building Permit Fees are equal to .002 of the stated project cost 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 cost, 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 owners representative and Commercial Construction Trustee, should confer prior too 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 #: _____ - _____ - # _____
(yr.) (mo.)

Application Date: _____ Received By : _____

Plan Review Fee: \$ _____ (Non-Refundable)

Permit Fee: \$ _____

Fee Total: \$ _____

Date Permit Issued: _____ Issued By: _____

R. M. Patsche
Commercial Construction Trustee

Permit Start Date : _____ Permit Expiration Date: _____

Denial Date : _____

Reason for Denial: _____