



APPLICATION FOR A PERMIT Page 1 of 2 + Site Plan _____ Permit # _____

**COMMUNITY DEVELOPMENT
BUILDING DIVISION
ROCHELLE CITY HALL**
420 N. 6th Street
Rochelle, Illinois 61068
Sr. Inspector/Zoning **561-2022**
Property Maintenance **561-2026**
Telephone (815)-562-6161
FAX - (815)-562-3888

Street Opening Deposit \$ _____	For Office Use Only
Stormwater Impact Fee \$ _____	DATE PAID/ISSUED ____/____/____
1. Permit Fee \$ _____	CASH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/>
2. Permit Fee \$ _____	PAID BY: CHECK# _____
(Penalty Fee (x2) \$ _____)	Name on check - _____
TOTAL FEE (S) \$ _____	Approved by _____
<input type="checkbox"/> Fees Waived - _____	BUILDING OFFICIAL

FOR ALL PERMIT APPLICATIONS - Fill in requested information below on those lines marked with an "*" asterisk.
For NEW CONSTRUCTION, including additions, remodeling, garages, sheds, fences, decks, patios, porches, signs, driveways, curbcuts, swimming pools etc. complete entire application and submit a site plan for the proposed project location, showing setbacks and current dimensions of structures on property.

***1. TODAY'S DATE** _____

*2. OCCUPANTS NAME	BUSINESS NAME	CONSTRUCTION ADDRESS	PHONE #

*3. EMAIL ADDRESS			

*4. OWNER INFORMATION – Owners Name, Address, Phone No. Is the address above vacant? Yes <input type="checkbox"/> No <input type="checkbox"/> Is it rental prop.? Yes <input type="checkbox"/> No <input type="checkbox"/>			
OWNER	ADDRESS	PHONE	
_____	_____	_____	

***5. GENERAL DESCRIPTION OF PROPOSED CONSTRUCTION & DIMENSIONS.** New Addition
Alterations/Repairs Remodel Replacement

***a.** _____

b. WILL THERE BE ANY: ELECTRICAL yes no PLUMBING yes no Finish basement yes no
Sprinklers yes no – If yes, # of heads _____

5. Total number of square feet for each floor including the basement, breezeways, garages, porches, decks, driveways etc.

Basement _____ sq.ft.	Garage _____ sq.ft.	Driveway _____ sq.ft.	No. Full bathrooms _____ partial baths _____
1st Floor _____ sq.ft.	Porches _____ sq. ft.		No. Bedrooms _____ No. of stories _____
2 nd Floor _____ sq.ft.	Patios-concrete _____ sq.ft.	Total lot coverage including hard surfacing and structures _____ sq.ft.	
Total living area _____ sq.ft.	Decks _____ sq.ft.	#Parking spaces outside-off street enclosed # _____	
Other _____ sq.ft.	No. of proposed elevators _____	Existing Elevators _____	

PROPOSED USE of BUILDING: _____

PRESENT USE(S) OF BUILDING: _____

***7. IMPROVEMENT COST OF CONSTRUCTION-** including Materials & Labor for each permit - what would it cost if you hired a contractor for the work to be done. (For example: a fence might be \$ 3,000 , a pool \$3,000, a shed is \$1,000., electrical work \$500, roof \$3,000 etc.)

\$ _____ , _____ , _____

***8. CONTRACTOR INFORMATION - LIST ALL CONTRACTORS- include license no., address, phone, and fax numbers.**

If the property owner is doing the work then print your name as the general contractor.

ALL ROOFING CONTRACTORS MUST SUBMIT A COPY OF THEIR ILLINOIS STATE ROOFING LICENSE.

ALL PLUMBING CONTRACTORS MUST SUBMIT A COPY OF THEIR STATE LICENSE.

NAME ADDRESS PHONE & FAX NO.

***GENERAL**

CARPENTER

ARCHITECT/ENGINEER

EXCAVATING

MASONRY

MECHANICAL

ELECTRICAL

PLUMBING

STATE LICENSE #

ROOFING

STATE LICENSE #

DRYWALL/PLASTER

PAVING

SPRINKLER SYSTEMS

***9. I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY**, or 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 CODES AND ORDINANCES** of The City of Rochelle. I also agree that all work performed under said permit will be in **accordance with the plans and plot diagram which accompany this application**, except for changes as may be authorized by the Building Officer and that inspections will be conducted in accordance with the inspection procedure. I certify that the City's authorized representative shall have the authority to enter areas covered by such permit during normal business hours and that a *Certificate of Occupancy* is required upon completion of the work authorized by this permit.

***X**

Signature of Applicant / OWNER OF RECORD/ AUTHORIZED AGENT CONTRACTOR

This permit application may be mailed to the City of Rochelle 420 N. 6th Street, Rochelle, IL 61068, or faxed to the attention of the inspector at 815-562-3888 or delivered to Building Services at 420 N. 6th Street, Rochelle, IL.

SITE PLAN AND SETBACKS

Address: _____ LOT # _____ Permit # _____

Proposed structure height (feet) - _____ LOT DIMENSIONS AND TOTAL SIZE _____

Street Frontage (feet) _____	Front Setback (feet) _____	Rear Setback (feet) _____
Left Setback Sideyard(feet) _____	Right Setback Sideyard (feet) _____	Height above grade (feet) _____

A site plan is required for the following permits: Additions, Decks, Approaches/ Driveways/ Sidewalks, Fences, Parking Lots, Patios, Porches, Swimming Pools/Hot Tubs, Sheds and Garages, New Construction, Ramps, Signs, Tanks.

Use this paper to sketch a Site Plan or attach your own to show the following information:

1. Show all structures on lot (existing and proposed) and all hard surfaced areas. How much of front yard is covered?
How much of rear yard is covered ? _____
Total of Entire Lot Coverage _____
2. Mark front, side, and rear yard setbacks and 25 ft. vision clearance triangle, (number of feet between the lot line and structure).
3. Show number of feet between all structures on the lot.
4. Show location of meters; gas, water, electric.
5. Show location of all electric, cable and telephone lines including underground and overhead.
6. Print name and address and location of all streets and avenues abutting property and show alleys and easements.

SCALE:
1 SQUARE = _____ FEET

