APPLICATION FOR BUILDING PERMIT

Permit #

The applicant hereby certifies to the correctness of the information provided and agrees to perform the work described in compliance with all provisions of the Zoning Ordinance and the Building Regulations of the City of Des Plaines

DES PLAINES ILLINOIS
COMMUNITY AND ECONOMIC DEVELOPMENT
1420 Miner Street, Des Plaines, IL 60016
P: 847.391.5380 F: 847.391.5371

Work to be performed: _____

_____

Check: ☐ Residential or ☐ Commercial at _____
Address of Work Site

For _____ Owner Phone #_____
Property Owner

PIN # _____ Square Feet_____ Construction Value $_____

	General Contractor	Company Name _____ Phone _____ Address _____ Email _____
	Carpenter	Name _____ Phone _____ Address _____ Email _____
	Plumber Sewer	Name _____ Phone _____ Address _____ Email _____
	Electrician	Name _____ Phone _____ Address _____ Email _____
	Roofer	Name _____ Phone _____ Address _____ Email _____
	Concrete Asphalt Pavers	Name _____ Phone _____ Address _____ Email _____
	HVAC	Name _____ Phone _____ Address _____ Email _____
		Name _____ Phone _____ Address _____ Email _____
		Name _____ Phone _____ Address _____ Email _____

To be completed by owner or owner's agent

Print Name _____

Address _____

_____

Phone _____ Cell _____

Email _____

Signed _____

Date _____

Permit Fee $ _____

Approved this _____ Day of _____ 20 ____

_____
Code Official

Please call for all inspections 847.391.5382

Email Signed Permit Applications to permits@desplaines.org