VILLAGE OF BRIDGEVIEW

BUILDING DEPARTMENT

7500 S. Oketo Avenue • Bridgeview, IL 60455

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT 11/07

Phone: 708-594-2525 • Fax: 708-924-8095

Instructions:		oplicants, cor rical work - P												<u>.</u>	
Application Date	e:	Permit Type:		☐ Electric	al 🗖	l Plumbir	ng 🗔	☐ Mecha	anical		Other	Applicar		wner:	Permit No.
		RTY INFO	RMAT	ION											Į į
Street Address:										Apt:	Zip:		Zoni	ng:	
Pin Number:					Lot N	umber:	Parcel Typ		☐ Co	mmerc	ial 🗆	Industri	al [Other	
	OWNE	R INFORM													
First Name:			Las	st Name:							Phone	:			
Street Address:								City:			1	State:	Zi	p:	
PART 3 -	CONTR	RACTORS	INFO	OITAMS	1										
	Contrac	tor's Name (Last Nan	ne, First Nam	e)	Stree	et Address	, City, St	ate				Pho	ne Number	
Applicant (Not Owner)															Address:
Architect / Engineer															ess:
General Contractor															
Excavation															
Concrete															
Carpentry															
Electrical															
Plumbing															
Sewer															
Mchanical															
Roofing															
Masonry															_
Drywall or Lathing															
Sprinkler															
Paving															
Fire Alarm															
PART 4 - I hereby certify t		FICATION	ord of the	named pro	nerty or the	at the prop	nosed work	is authori	zed hv th	e Owner	of recor	d and that	l have	heen authorized	d by
the owner to ma application is iss reasonable hour	ake this appl sued, I cdrti	lication as his fy that the cod	authorize e official	ed agent and or the code	I agree to official's au	conform to thorized re	all applica	able laws o	of this juri	diction.	In addition	on, if a perr	mit for	work described	l in this
TOGOTIANIE HOUI	TO CHILOTOG	and provisions	J. 1115 CC	عدري مهاهان	abic 10 300	pomili.	Applicant's	Signature:							

PART 5	5 - BUILDIN	IG PERMIT AF	PLICATI	ON									
IMPROVEMENT TYPE:			ST	STRUCTURAL FRAME: (Check Applicable)				EXTERIOR WAL	EXTERIOR WALLS: (Check Applicable)				
☐ New Construction ☐ Addition				☐ Steel ☐ Concrete				Steel	☐ Steel ☐ Concrete				
☐ Alteration ☐ Demolition				Masonry				☐ Masonry	☐ Masonry				
Repair / Replacement				Other: Identify				Other: Identify					
Street Fronta	age (Feet)		St	ories (Number)				Lot Area (Sq. Ft.)					
Front Setbac	ck (Ft.)		Ве	ed Rooms (Number)				Building Area (Sq. Ft.)					
Rear Setbac	k (Ft.)		Fu	II Baths (Number)				Parking Area (Sq. Ft.)					
Left Setback (Ft.)				artial Baths (Number)				Living Area (Sq. Ft.)					
Right Setback (Ft.)				arages (Number)				Basement Area (Sq. Ft.)					
Height Abov	e Grade (Ft.)		Wi	indows (Number)			Garage Area (Sq. Ft.)						
New Reside	ntial Units (Num	nber)	Fir	replaces (Number)			Office / Sales Area	Office / Sales Area (Sq. Ft.)					
Existing Res	sidential Units (N	Number)	En	closed Parking (Number			Service Area (Sq. I	Service Area (Sq. Ft.)					
Elevators / E	scalators (Num	nber)	Οι	utside parking (Number)			Manufacturing (Sq	Manufacturing (Sq. Ft.)				
Estimate Sta		/ /	ı	timate Finish Date:		/	/	Building Estimate	Building Estimate Value \$				
PART 6 - ELECTRICAL PERMIT APPLICATION													
ELECTRICA		YES NO											
	e: AMI	PS Number of C		s: 2 Wire: 4 Wire:				Number of Service Outlets: 110V 220V					
	R DEVICES		No.	OUTPUT / LOAD	<u> </u>	POV	VER DEV	/ICES	No.	OUTPUT / LOAD			
1					5								
2				6									
3					7								
4	4				8								
									<u> </u>				
LItility Service	ce Revisions:				iotai N	umber d	of Motors:						
Other Gervie	CC TICVISIONS.												
Estimate Start Date: / / E				Estimate Finish Date: / /				Electrical Work Estimate Value \$					
		NG PERMIT A											
PLUMBING		YES NO			ixtur	es Bein	g Installe	ed, Replaced or Repaire	ed				
				inking Fountains:				Back Flow Preventers:					
Shower Stal	ls:		Floor Drain	ns:			Water Pumps:						
Lavatories:			Water Hea	aters:			Roof Openings:						
Toilets:			Water Sof	teners:			Parking Lot Drains:						
Urinals:			Sewage E	Sewage Ejectors:				Inside Downspouts:					
Sinks:			Sump Pur	mps:			Standpipes (Yes / No) Number Hose Outlets:						
Laundry Tub	os:		Grease Tra	aps:			Fire Sprinklers (Yes / No) Number of Heads:						
Dishwashers: B				dets:				Lawn Sprnklers (Yes / No) Number of Heads:					
Garbage Disposals: Sw				imming Pools:				TOTAL FIXTURES:					
Public Water	r: 🗆 Yes 🔲 N	lo Public Sewer:	☐ Yes ☐	'es No Water Service Size: in.				n. Water Meter Size: in. Avg. Daily Water Use: gpo					
Utility Servi	Utility Service Revisions:												
Estimate Start Date: / / Estimate Finish Date: / / Plumbingl Work Estimate Value \$													

PART 8 - MECH	ANICAL P	FRMIT	T APPLICATION								
MECHANICAL WORK:	YES	□ NO		erl New or Reg	olacemei	nt Units					
Forced Air Furnace:			Incinerator:		Air Ha	Air Handling Unit:					
Unit Heater:			Boiler:		Heat	Heat Pump:					
Gas/Oil Conversion:			Coil Unit:		Air Cl	eaner:					
Space Heater:			Window A/C Unit:		Kitche	Kitchen Exhaust Hood:					
Gravity Furnace:			Split System A/C:		Hazaı	Hazardous Exhaust System:					
Solid Fuel Appliance:			A/C Compressor:		Electr	ric Furnace:					
Type of Heating Fuel:	GAS	□ c	DIL ELECTRIC	□ отн	HER:						
Utility Service Revisions	:										
Estimate Start Date:	/	/	Estimate Finish Date:	/ /	Mechanical W		Work Estimate Value \$				
	REQUIR	ED PE	RMIT APPLICATION(S	5)							
Permit Type:											
Description of Work:											
Estimate Start Date:	/	/	Estimate Finish Date:	/ /		Estimate Value	e \$				
PART 10 - PERM	1	OVAL(S									
PERMIT:	DATE:		INSPECTOR:				PERMIT / INSPECTION FEE:				
BUILDING ELECTRICAL											
PLUMBING											
MECHANICAL											
SPRINKLER					LANDE	\(\(\operatorname{A} \(\operatorname{A} \) \end{array} \)					
				P		VIEW FEE					
					O	THER FEE					
						A. ====					
					TOT	AL FEES					