

## Village of Bridgeview

7500 SOUTH OKETO AVENUE • BRIDGEVIEW, ILLINOIS 60455 • (708) 594-2525

	Appli	ication for	Plan Examin	ation and I	Building	<b>Perm</b>	it
			TE PARTS 1, 2, 3, & 4 OF THIS UMBING WORK - PART 7. FO				
APPLICATION DATE: PERMIT TYPE: BUILDING			ELECTRICAL PLUMBING MECHANICAL OTHER YES			_	
		F	PART 1 - PROPERTY	INFORMATIO	N		_
STREET ADD	RESS:			APT:	ZIP:	7	ZONING:
PIN NUMBER	:		LOT NUMBER:	PARCEL TYPE:		I	
			PART 2 - OWNER I	NFORMATION			
FIRST NAME:			LAST NAME:		PHONE N	UMBER:	
STREET ADDI	RESS:			CITY:	STATE	i: 2	ZIP:
EMAIL:				•	•	•	
		PAF	RT 3 - CONTRACTO	RS INFORMAT	ION		
	CONTRA	ACTORS NAME	STREET ADDRESS	S, CITY, STATE	EN	MAIL	PHONE NUMBER
APPLICANT (NOT OWNER)							
ARCHITECT/ ENGINEER							
GENERAL CONTRACTOR							
EXCAVATION							
CONCRETE							
CARPENTRY							
ELECTRICAL							
PLUMBING							
SEWER							
MECHANICAL							
ROOFING							
MASONRY							
DRYWALL OR LATHING							
SPRINKLER							
PAVING							
FIRE ALARM							

## **PART 4 - CERTIFICATION**

I HEREBY ACKNOWLEDGE THAT I AM THE OWNER OF THE RECORD OF THE NAMED PROPERTY, OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS AUTHORIZED AGENT AND I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF A PERMIT FOR WORK DESCRIBED IN THIS APPLICATION IS ISSUED, I CERTIFY THAT THE CODE 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.

BLE TO SUCH PERMIT.										
APPLICANT'S SIGNATURE:										
RESPONSIBLE PERSO	F WORK:	TITLE:				PHONE N	UMBEF	R:		
PART 5 - BUILDING PERMIT APPLICATION										
IMPROVEN	IENT TYPE		STRUCT	ΓURAL FR	AME		EXTER	RIOR WA	ALLS	
☐ NEW CONSTRU	CTION		STEEL			STEEL				
ALTERATION			MASONRY				☐ MASONRY			
REPAIR/ REPLA	CEMENT		CONCRETE				CONCRETE			
ADDITION			OTHER:				OTHER:			
☐ DEMOLITION										
STREET FRONTAGE (FT.	.)	STOF	RIES (#)			LOT AR	LOT AREA (SQ. FT.)			
FRONT SETBACK (FT.)		BED	ROOMS (#)			BUILDII	NG AREA (SC	). FT.)		
REAR SETBACK (FT.)		FULL	BATHS (#)			PARKIN	IG AREA (SQ.	FT.)		
LEFT SETBACK (FT.)		PART	ΓIAL BATHS (#)			LIVING	LIVING AREA (SQ. FT.)			
RIGHT SETBACK (FT.)		GAR	GARAGES (#)			BASEMENT AREA (SQ. FT.)				
HEIGHT ABOVE GRADE	(FT.)	WINI	DOWS (#)		GARAGE AREA (SQ. FT.)					
NEW RESIDENTIAL UNITS (#)		FIRE	PLACES (#)		OFFICE/S			/SALES AREA (SQ. FT.)		
EXISTING RESIDENTIAL UNITS (#)			LOSED PARKIN	G (#)		SERVICE AREA (SQ. FT.)				
ELEVATORS/ ESCALATORS (#)			OUTSIDE PARKING (#)			MANUFACTURING (SQ. FT.) BUILDING ESTIMATE VALUE				
ESTIMATE START DATE		ESTII	MATE FINISH D	SH DATE BUILDING (\$)			NG ESTIMATI	VALUE		
	PAF	RT 6 - E	LECTRICA	L PERI	IIT APPLIC	ATION				
ELECTRICAL WORK: TOTAL SERVICE: N			IUMBER OF CIRCUITS:			NUMBER OF SERVICE OUTLETS:				
YES NO AMPS		2 WIRE	2 WIRE: 3 WIRE: 4 WIRE:				110 V:		220 V:	
POWER DEVICES N			OUTPUT/ LOAI	D	POW	ER DEVIC	CES	NO.	OUTPUT/ LOAD	
1				5						
2				6						
3		$\bot$		7						
4				8						
LOW VOLTAGE		TOTAL NUMBER OF MOTORS:								
UTILITY SERVICE RE	VISIONS:									
ESTIMATED START D	ATE:	ESTI	MATED FINIS	SH DATE:	ELECTRICAL WORK SERVICE VALUE:					

PART 7 - PLUMBING PERMIT APPLICATION							
PLUMBING WORK:	YES NO	BELOW, ENTER THE N	HE NUMBER OF FIXTURES BEING INSTALLED, REPLACED, OR REPAIRED				
TUBS/ SHOWERS		DRINKING FOUNTAINS		BACK FLOW PREVENTORS			
SHOWER STALLS	RSTALLS		FLOOR DRAINS		IMPS		
LAVATORIES		WATER HEATERS		ROOF OPE	ENINGS		
TOILETS		WATER SOFTENERS		PARKING	LOT DRAINS		
URINALS		SEWAGE EJECTORS		INSIDE DOWNSPOUTS			
SINKS		SUMP PUMPS		STANDPIP	STANDPIPE HOSE OUTLETS		
LAUNDRY TUBS		GREASE TRAPS		FIRE SPRINKLER HEADS			
DISHWASHERS		BIDETS		LAWN SPRINKLER HEADS			
GARBAGE DISPOSALS		SWIMMING POOLS		TOTAL FIXTURES			
PUBLIC WATER: PUBLIC SEWER: WATER SERVICE SIZE (IN.) WATER METER SIZE (IN.) AVG. DAILY WATER USE (GPD):  YES NO YES NO YES NO UTILITY SERVICE REVISIONS:							
ESTIMATED START DATE: PLUMBING WORK SERVICE VALUE:						E VALUE:	
PART 8 - MECHANICAL PERMIT APPLICATION							
MECHANICAL WORK: YES NO BELOW, ENTER THE NUMBER OF NEW OR REPLACEMENT UNITS							
FORCED AIR FURNACE		INCINERATOR		AIR HANDLING UNIT			
UNIT HEATER		BOILER		HEAT PUMP			
GAS/OIL CONVERSION		COIL UNIT		AIR CLEANER			
SPACE HEATER		WINDOW A/C UNIT		KITCHEN EXHAUST HOOD			
GRAVITY FURNACE		SPLIT SYSTEM A/C		HAZARDOUS EXHAUST SYSTEM			
SOLID FUEL APPLIANCE		A/C COMPRESSOR		ELECTRIC FURNACE			
TYPE OF HEATING FUEL:  GAS OIL ELECTRIC OTHER							
UTILITY SERVICE REVISIONS:							
ESTIMATED START DATE:		ESTIMATED FINISH DATE:		MECHANICAL WORK SERVICE VALUE:			
PART 9 - OTHER REQUIRED PERMIT APPLICATION(S)							
PERMIT TYPE: ESTIMAT		ED START DATE:	T DATE: ESTIMATED FINISH DATE: ESTIMA		ESTIMATED VAL	UE:	
DESCRIPTION OF WORK:		1					

PART 10 - PERMIT APPROVALS							
PERMIT:	DATE:	INSPECTOR:		PERMIT/ INSPECTION FEE:			
BUILDING							
ELECTRICAL							
PLUMBING							
MECHANICAL							
SPRINKLER							
			PLAN REVIEW FEE				
		OTHER FEE					
			TOTAL FEES				