



Community Development
 1050 W Romeo Rd, Romeoville, IL 60446-1530
 (815) 886-7200 Fax #: (815) 886-2724
 Email: buildinginspections@romeoville.org

RESIDENTIAL

Application Date ____/____/____

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

Property & Owner Information		PIN #:	Office Use Only
Who is the applicant? <input type="checkbox"/> Owner <input type="checkbox"/> Contractor	Owner Name:		Permit Date:
Who is the contact person? <input type="checkbox"/> Owner <input type="checkbox"/> Contractor	Property Address:		Permit #:
Phone Number		Lot #:	Cost \$
Subdivision:		Township:	
Estimated Cost of Project:		Improvement Square Footage:	
Description of Project:			

BUILDING PERMIT APPLICATION

Structural Frame (check that applicable) <input type="checkbox"/> STEEL (1) <input type="checkbox"/> MASONRY (2) <input type="checkbox"/> CONCRETE (3) <input type="checkbox"/> WOOD (4) <input type="checkbox"/> OTHER (5), IDENTIFY: _____	Exterior Walls (check those applicable) <input type="checkbox"/> STEEL (1) <input type="checkbox"/> MASONRY (2) <input type="checkbox"/> CONCRETE (3) <input type="checkbox"/> WOOD (4) <input type="checkbox"/> OTHER (5), IDENTIFY: _____
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ELECTRICAL PERMIT APPLICATION

Electrical Work Yes No

Total Service _____ AMPS	No. of Circuits: _____ 2 WIRE _____ 3 WIRE _____ 4 WIRE _____	Number of Service Outlets: _____ 110V _____ 220V			
POWER DEVICES	No.	OUTPUT/LOAD	POWER DEVICES	No.	OUTPUT/LOAD
1			3		
2			4		
					Electrical Work Estimated Cost: \$ _____

PLUMBING PERMIT APPLICATION

Plumbing Work Yes No

Enter the Number of Fixtures Being Installed, Replaced or Repaired			
Tubs/showers		Water closets	
		Lavatories	
		Total Fixtures	
			Plumbing Work Est. Value: \$ _____

MECHANICAL PERMIT APPLICATION

Mechanical Work Yes No

Enter the Number of New or Replacement Units			
Forced Air Furnace		A/C Unit	
Unit Heater		Boiler	
		Pool heater	
		Heat Pumps	
Type of Heating Fuel: (Check One) <input type="checkbox"/> Gas (1) <input type="checkbox"/> Oil (2) <input type="checkbox"/> Electric (3) <input type="checkbox"/> Coal (4) <input type="checkbox"/> Wood (5) <input type="checkbox"/> Other(6) _____			Mechanical Work Est. Value: \$ _____

Architect / Engineer	
Contractor Name	
Contractor Address	
Contractor Phone	

Sub-Contractors				
Type of Contractor	Business Name	Street Address, City, State and Zip	Phone Number	Registration Number
Excavation				
Concrete				
Masonry				
Electrical				
Plumbing				
Sewer				
Mechanical				
Roofing				
Paving				
Carpentry				
Insulation				

Permit & Inspection Requirements		Office Use
<i>Please read the requirements and place a ✓ in the column to the left to confirm that you understand and agree.</i>		
<input type="checkbox"/>	The Building Permit shall be posted in the building's window where it can be seen from the street.	
<input type="checkbox"/>	Each phase of construction shall be inspected and approved by the Village of Romeoville prior to proceeding to the next stage of construction.	
<input type="checkbox"/>	• All inspections shall be scheduled in advance by calling (815)886-7200 or by emailing buildinginspections@romeoville.org . Your permit number shall be provided when inspections are scheduled.	
<input type="checkbox"/>	• Failure to call for required inspections may result in a "Stop Work Order".	
<input type="checkbox"/>	• Should you fail an inspection, a re-inspection fee shall be paid before continuing work and before scheduling another inspection.	
<input type="checkbox"/>	The project shall start within ninety (90) days from the date the permit is issued and completed within one hundred and eighty (180) days.	

<input type="checkbox"/>	New homes shall include Permit Plat 11x17-show property lines, proposed building, driveway, top of foundation, sidewalk, grades at four (4) corners of building/lot, B-box and easements	
<input type="checkbox"/>	Spot survey required	

I hereby declare that I have read and understood this application. The above information and any attachments are correct. I agree, that in consideration of and upon issuance of a building or use permit, that I am allowed to do such work as herewith applied for, and that such premises shall be used only for such purposes as set forth above.

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 laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or 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.

Signature of Applicant: _____ Date: _____

This Page for Office Use Only (Approval & Review Status)

Building Department			
Activity	Reviewed by		
Building Review - BLDG		Building Review - HVAC	
Building Review - ELECTRIC		Building Review - PLUMBING	

Planning: (if applicable)			
Date Plans Received		Date Plans Approved	
Plans Examiner		Plans Approved By	

Clerical			
Clerical to check on all contractors to make sure that they are current with their license.		Contacted Date:	
Clerical check for outstanding debt:		Person Contacted:	
		Contacted By:	

Notes	
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