

BUILDING PERMIT APPLICATION

PERMIT NO. _____

VILLAGE OF SAUK VILLAGE

Village of Sauk Village 21801 Torrence, Sauk Village

For Building & Inspection Questions, call B&F Construction Code Services at 847-428-7010

Project Address:		Project Description:		
Subdivision:		Applicant Email:		
Owners Name:		Address:		Phone:
Contractor:		Address:		Phone:
Building Permit Type <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Windows <input type="checkbox"/> Siding <input type="checkbox"/> Re-Roof <input type="checkbox"/> Fence <input type="checkbox"/> Solar <input type="checkbox"/> Garage <input type="checkbox"/> Driveway <input type="checkbox"/> Accessory Structure <input type="checkbox"/> Residential Addition				
Project Type <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Alteration (type) _____				
Carpenter:		Electrician:		
Plumber:		HVAC:		
Plumbing <input type="checkbox"/> Municipal <input type="checkbox"/> Septic		Water <input type="checkbox"/> Municipal <input type="checkbox"/> Well		Number of Bedrooms
			Number of Baths	Estimated Cost
Total Square Feet of Construction: _____			Call for Questions and Inspections: B&F 847-428-7010	
No error or omission in either the plans or application, whether said plans or application has been approved by the building inspector or not shall permit or relieve the applicant from constructing the work in any other manner that provided for in the Ordinances of Wonder Lake relating thereto. The applicant having read this application and fully understanding the intent thereof declares that the statements made are true to the best of my knowledge and belief.				
SIGNATURE OF APPLICANT _____		PRINT NAME _____		DATE _____
CONDITIONS OF APPROVAL This permit is issued pursuant to the adopted building and zoning ordinances and the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Building Official _____ Permit Issued on _____ Permit expires one year form the date issued unless otherwise noted here.				
Building: <input type="checkbox"/> Footing <input type="checkbox"/> Foundation <input type="checkbox"/> Rough <input type="checkbox"/> Backfill <input type="checkbox"/> Insulation <input type="checkbox"/> Inspection Required Pre-pour Concrete <input type="checkbox"/> Final			Electric: <input type="checkbox"/> Rough <input type="checkbox"/> Service <input type="checkbox"/> Underground <input type="checkbox"/> Final	
Plumbing: <input type="checkbox"/> Rough <input type="checkbox"/> Underfloor <input type="checkbox"/> Underground <input type="checkbox"/> OS Sewer <input type="checkbox"/> Water <input type="checkbox"/> Final			HVAC: <input type="checkbox"/> Rough <input type="checkbox"/> Final	
FEES Project Square Footage _____			RECEIPT	
Building Fee _____		Sub Total _____		CK# _____ <input type="checkbox"/> Cash
Electric Fee _____		Admin Fee _____		Amount _____
Plumbing Fee _____		Bond _____		Date _____
HVAC Fee _____		Other _____		From _____
Other _____		Total _____		Received by _____

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