



# Building Permit Application

15440 SOUTH CENTRAL AVENUE, OAK FOREST, ILLINOIS 60452-2195  
708.444.4817 ▪ FAX 708.687.1179 ▪ WWW.OAK-FOREST.ORG

◆◆ PLEASE PRINT ◆◆

PERMIT #:		EXPIRATION DATE:	
<b>REQUIREMENTS:</b> [1] TWO COMPLETE SET OF DRAWINGS & SPECIFICATIONS ( <i>All new commercial construction requires 3 sets of plans</i> ) and [2] TWO PLATS OF SURVEY INDICATING: ◆ the location of all existing structures, ◆ the dimensions of all existing structures, ◆ the distance of all existing and <u>proposed structures</u> from each lot line and adjacent structures. [3] COPY OF SIGNED CONTRACT.			
OWNER'S NAME		PHONE	
APPLICANT'S NAME		PHONE	
JOBSITE ADDRESS		PIN# 28- -0000	
LOT	BLOCK	SUBDIVISION	BREMEN TOWNSHIP
TYPE OF BUILDING: <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family <input type="checkbox"/> Townhouse <input type="checkbox"/> Commercial			
BUILDING <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration			
GARAGE: <input type="checkbox"/> Attached _____ sq. ft. <input type="checkbox"/> Detached _____ sq. ft.			
OTHER IMPROVEMENT / BRIEF PROJECT DESCRIPTION:			CONSTRUCTION VALUATION \$ _____
CONTRACTOR INFORMATION: IF 2 CONTRACTORS ARE USED FOR YOUR PROJECT, PLEASE CHECK BOX AND ADD INFORMATION ON BACK OF FORM. ➔ <input type="checkbox"/> SEE REVERSE SIDE			
◆NOTE – All trades & subcontractors <u>must be registered by the City</u> prior to issuance of this permit. If more than two trades/contractors are involved with this project, a "Contractors, Trades & Subcontractors List" MUST be completed.			
BUSINESS NAME		CONTACT PERSON	
ADDRESS		CITY	ZIP
OFFICE PHONE		CELL	FAX

I hereby certify that I am the owner or duly authorized agent of the owner for the purposes of this application. I further certify that I have read and examined this application and know the same to be true and correct. If any of the information provided on this application is incorrect, the permit or approval may be revoked. I also understand that all work shall be completed in compliance with the City of Oak Forest Codes and Ordinances and the statues of the State of Illinois.

### REQUIRED FEES – OFFICE USE ONLY

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Review and approved/denied by: \_\_\_\_\_

Building Official \_\_\_\_\_

Date \_\_\_\_\_

CONDITIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- Building Permit Fee \_\_\_\_\_
- Plan Review Fee \_\_\_\_\_
- Inspection Fee \_\_\_\_\_
- Electric Insp. Fee \_\_\_\_\_
- General Impact Fee \_\_\_\_\_
- Water Tap Fee \_\_\_\_\_
- Sewer Tap Fee \_\_\_\_\_
- Meter Fee \_\_\_\_\_
- C/R Water \_\_\_\_\_
- Fire Protection Fee \_\_\_\_\_
- Park Fee \_\_\_\_\_
- Recapture Fee \_\_\_\_\_
- Retainer \_\_\_\_\_

TOTAL FEES: \_\_\_\_\_

PAYMENT TYPE: CK# _____ Cash
AMOUNT PD: _____ DATE PD: _____

**CALL JULIE BEFORE YOU DIG**  
Simply call: 811

## REQUESTED INSPECTIONS

◆ INSPECTION ◆	DATE APP.	NOT APP.	◆ INSPECTION ◆	DATE APP.	NOT APP.
[ ] Roof Deck	/ /	/ /	[ ] Base	/ /	/ /
[ ] Post Holes	/ /	/ /	[ ]	/ /	/ /
[ ] Piers	/ /	/ /	[ ] Final	/ /	/ /

A FEE OF \$60 WILL BE ASSESSED FOR ANY AND ALL 1<sup>st</sup> REINSPECTIONS AND 1<sup>st</sup> MISSED INSPECTIONS. [Subsequent Reinspections and Missed Inspections: \$120.00]  
Additional inspections: \$60.00

**24 hour lead time for all inspections.**  
**Call: 708-444-4817**