

CITY OF MORRIS

BUILDING & ZONING OFFICE

(815)942-0103 FAX (815)9420216

NEW CONSTRUCTION- RESIDENTIAL PERMIT APPLICATION

PERMIT NO. _____

INSULATION: _____

LANDSCAPE: _____

STEEL: _____

SURVEYOR: _____

GUTTERS: _____

FLOORING: _____

CARPET,TILE,HARDWOOD: _____

DAMP PROOFING: _____

TRIM & FINISH: _____

TRUSSES: _____

WINDOWS: _____

ASPHALT/PAVING _____

FENCING: _____

OTHER: _____

OTHER: _____

SQ. FT. OF:
LIVING AREA: _____
GARAGE: _____
BASEMENT: _____
LOT AREA: _____

NUMBER OF:
BEDROOMS: _____
BATHROOMS: _____ (F) _____ (P)
GARAGES: _____
STORIES: _____

----- FOR OFFICE USE ONLY -----

SET BACK:

FRONT: _____ **LEFT:** _____ **FLOOD PLAIN:** _____

REAR: _____ **RIGHT:** _____ **ELEVATION:** _____

PERMIT ISSUED BY _____ **DATE** _____

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NEW CONSTRUCTION- RESIDENTIAL PERMIT APPLICATION

PERMIT NO. _____

SITE INFORMATION

ADDRESS: _____
LOT: _____ **BLOCK:** _____ **SUBDIVISION:** _____
PROPERTY IDENTIFICATION NO.: _____

BUILDING DATA

BUILDING -USE- CLASSIFICATION: _____
TYPE: _____ **EST. VALUE:** _____

APPLICANT INFORMATION

I HEREBY CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO CONFORM TO ALL GOVERNING INFORMATION AND REGULATIONS SET FORTH BY THE CITY OF MORRIS.

SIGNED: _____	REGISTRATION NO.: _____
ADDRESS: _____	FAX NO.: _____
PHONE: _____	CELLULAR NO.: _____

CONTRACTOR INFORMATION (ALL CONTRACTORS MUST BE LICENSED WITH THE CITY OF MORRIS OR PERMIT WILL NOT BE ISSUED)

ARCHITECT: _____

GENERAL: _____

FOUNDATION: _____

EXCAVATOR: _____

CARPENTER: _____

MASONRY: _____

PLUMBING: _____

ELECTRICAL: _____

ROOFING: _____

HVAC: _____

DRYWALL: _____

SEWER/WATER: _____

PAINTING: _____