



CITY OF CHICAGO HEIGHTS

DEPARTMENT OF PLANNING, ZONING AND COMMUNITY DEVELOPMENT

BUILDING/CODE ENFORCEMENT

APPLICATION FOR BUILDING PERMIT

LOCATION: _____

OWNER: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

DATE: _____

PERMITS EXPIRE 6 MONTHS FROM ISSUE DATE

VALUE OF

CONSTRUCTION: _____

ARCHITECT/
ENGINEER _____

ADDRESS

EMAIL _____

PHONE _____

CONTRACTOR _____

ADDRESS

EMAIL _____

PHONE _____

PLUMBER _____

ADDRESS

EMAIL _____

PHONE _____

HVAC CONTRACTOR _____

ADDRESS

EMAIL _____

PHONE _____

ELECTRICAL CONTRACTOR _____

ADDRESS

EMAIL _____

PHONE _____

OFFICE USE ONLY

SENIOR EXEMPTION*

PERMIT FEES

BUILDING

PLUMBING

METERS AND BRASS GOODS

HEATING

ELECTRICAL

DEMOLITION

ESCROW DEPOSIT

PLAN REVIEW (IN HOUSE)

ADMINISTRATIVE FEE

INSPECTION FEE

TOTAL:

*To qualify for Senior Exemption, resident must show a government photo ID and a current utility statement other than water bill.

CODE ADHERE OF FOLLOWING STANDARDS

2012 INTENTIONAL CODE COUNCIL PROPERTY MAINTENANCE CODE
2014 ILLINOIS PLUMBING CODE
2017 NATIONAL ELECTRICAL CODE
2000 NATIONAL FUEL AND GAS CODE
2012 INTERNATIONAL MECHANICAL CODE
2018 INTERNATIONAL RESIDENTIAL CODE (IRC)
2018 INTERNATIONAL BUILDING CODE (IBC)
2012 INTERNATIONAL ENERGY CONSERVATION CODE
CITY ORDINANCE AND ZONING CODES

SCOPE OF WORK-TO BE FILLED OUT BY APPLICANT

I HEREBY CERTIFY THAT THE STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND THAT ALL CONSTRUCTION WORK UNDER THE PROPOSED PERMIT AND SUBSEQUENT USE OF THE PREMISES WILL CONFORM TO THE MUNICIPAL CODE OF THE CITY OF CHICAGO HEIGHTS. I AGREE TO KEEP A COPY OF APPROVED PLANS ON SITE. I FURTHER CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED TO APPLY FOR THE APPROPRIATE PERMITS. PER THE CITY CODE, UPON PRESENTATION OF PROPER CREDENTIALS, THE BUILDING OFFICIAL OR DUTY AUTHORIZED REPRESENTATIVE MAY ENTER AT REASONABLE TIMES ANY BUILDING, STRUCTURE OR PREMISES IN THE JURISDICTION TO PERFORM ANY DUTY IMPOSED HIM BY THIS CODE (SEC 105.1 OF CABO).

☐

OWNER OCCUPIED

☐

RENTAL

DATE: _____

OWNER: _____

APPLICANT: _____