

TYPE OF PROJECT	
<input type="checkbox"/> Single Family	<input type="checkbox"/> New
<input type="checkbox"/> Multi Family	<input type="checkbox"/> Addition
<input type="checkbox"/> Comm/Off	<input type="checkbox"/> Alter/Repair
<input type="checkbox"/> Ind/Off	<input type="checkbox"/> Other
Build out permits required - Yes No (Circle One)	

**BUILDING PERMIT APPLICATION
NEW CONSTRUCTION/ADDITIONS/ALTERATIONS
VILLAGE OF RICHMOND**

5600 Hunter Drive
Richmond, IL 60071
(815)678-4040 (815)678-2403fax

DATE RECEIVED _____

PROJECT ADDRESS: _____ LOT # _____ FLOOD PLAIN: Y / N

SUBDIVISION _____ ZONING _____ PIN # _____

OWNER NAME _____ PHONE _____

MAILING ADDRESS _____ CITY _____ STATE/ZIP _____

OFFICE USE ONLY	
PERMIT # _____	
ISSUE DATE _____	
EXP DATE _____	
FINAL DATE _____	
FEES	
BUILDING:	\$ _____
PLUMBING:	\$ _____
ELECTRICAL:	\$ _____
MECHANICAL:	\$ _____
PLAN REVIEWS:	\$ _____
ADMINISTRATIVE:	\$ _____
PARK:	\$ _____
OTHER:	\$ _____
BOND:	\$ _____
TOTAL	\$ _____
<small>(total made payable to: Village of Richmond)</small>	
WATER/SEWER:	\$ _____
<small>(made payable to: Village of Richmond Water/Sewer)</small>	
SCHOOL DIST:	\$ _____
<small>(made payable to: Nippersink School Dist. #2)</small>	
FIRE DIST:	\$ _____
<small>(made payable to Richmond Township Fire Protection District)</small>	

PROJECT DESCRIPTION
(Include amps, size, footage and/or dimensions as it pertains to work)

TOTAL COST OF IMPROVEMENT \$ _____

All applicable areas of the permit must be completed. All required documentation must be submitted with application in order to expedite approval process.

The State of Illinois requires that any plumbing work not being done by the resident Owner of a residential property be done by a Plumbing Contractor Licensed & Registered in the State of Illinois.

- IN ADDITION TO COMPLETING THIS APPLICATION, THE FOLLOWING ITEMS ARE REQUIRED:**
- Two (2) copies of a plat of survey for the proposed location of work
 - 3 sets of architectural drawings (for new construction or structural alterations)
 - Copy of estimate or proposal from contractor

Contractor Name	Company Name/Name	Mailing Address City State, Zip	Phone and Fax	License #	Cert. of Insurance	Check if all rec'd.
General Contractor						
Plumbing Contractor						
Electric Contractor						
Excavator Contractor						
Concrete Contractor						
Roofing Contractor						
HVAC Contractor						
Insulation Contractor						
Sewer Contractor						
Others (attach list)						

NEW CONSTRUCTION PERMIT INFORMATION

Stories _____ # Units _____ #Bedrooms _____ #Bathrooms _____ /Fixtures _____ Garage __attached__ detached

1st Floor sq ft/cu ft _____ 2nd Floor sq ft/cu ft _____ Other sq ft/cu ft _____ Total Ft _____
(Commercial/Industrial Projects based on cubic feet)

Water Service Size required _____ Water Meter size required _____ Additional Meter _____

Construction Type ___Manufactured___ Site Built Roof Type _____

I HERBY DECLARE THAT THE INFORMATION HEREIN AND ATTACHED IS CORRECT AND AGREE IN CONSIDERATION OF AND UPON ISSUANCE OF PERMIT, TO DO OR ALLOW TO BE DONE ONLY SUCH WORK AS HEREWITH APPLIED FOR AND THAT SUCH PREMISES AND ITS EXISTING AND PROPOSED BUILDINGS AND STRUCTURES SHALL BE USED OR ALLOWED TO BE USED FOR ONLY SUCH PURPOSES AS SET FORTH.

SIGNED: _____ **DATE:** _____
(OWNER OR AUTHORIZED AGENT)

THIS PERMIT IS GRANTED AND ACCEPTED WITH THE EXPRESS UNDERSTANDING AND AGREEMENT THAT SAID BUILDING AND CONNECTIONS SHALL CONFIRM IN ALL RESPECTS WITH THE ORDINANCES OF THE VILLAGE OF RICHMOND AS NOW IN FORCE REGULATING THE CONSTRUCTION OF BUILDINGS.

(VILLAGE ADMINISTRATOR) **DATE:** _____

INSPECTION PROCESS

Effective January 5, 2009, The Village of Richmond Inspections are to be phoned in directly to the Village of Spring Grove at 815-675-2121. State you have a Richmond inspection, give them your name, name of company, address of inspection, contact name, contact number and type of inspection needed.