

BUILDING PERMIT APPLICATION

SINGLE FAMILY DWELLING - ROOM ADDITION

PROPERTY OWNER		GENERAL CONTRACTOR	
NAME:		COMPANY:	
ADDRESS:		CONTACT:	
CITY, ST, ZIP:		ADDRESS:	
PHONE #:		CITY, ST, ZIP:	
PHONE #:		PHONE #:	
		PHONE #:	

PROPERTY INFORMATION			
PROPERTY ADDRESS:			
TAX PARCEL NUMBER:			
TOWNSHIP:			
ZONING CLASSIFICATION:			
IS PROPERTY IN THE FLOODPLAIN?			

PLANS SUBMITTAL CHECKLIST		
SITE PLAN (see handout)		
TWO (2) SETS OF PLANS – TYPICAL WALL SECTION (see handout)		
ENGINEERED TRUSS DRAWINGS		
TRUSS LAYOUT SHEET		
RESCHECK OR OTHER SIMILAR COMPLIANCE REPORT		
WINDOW SCHEDULE		
LIST OF SUBCONTRACTORS		
APPROVED AND ISSUED GRADING AND DRAINAGE PERMIT	#	
APPROVAL FROM HEALTH DEPARTMENT	#	
APPROVAL ANDALUSIA ZONING & PUBLIC WORKS (if applicable)		
ELEVATION CERTIFICATE (if applicable)		
SIGNED CONTRACT WITH BID PRICE		

Current Codes Being Used (with local amendments):

- * 2012 International Residential Code*
- * 2011 National Electrical Code*
- * 2018 IECC per Illinois Energy Efficient Buildings Act (20 ILCS 3125/1)
- * State of Illinois Plumbing Code (225 ILCS 320)
- * Illinois Accessibility Code (410 ILCS 25)
- * Rock Island County Zoning Resolution

SUBCONTRACTORS				
TYPE	NAME	REGISTERED		
ELECTRICAL				
EROSION CONTROL				
EXCAVATION				
FOUNDATION				
FRAMING				
HVAC				
INSULATION				
PLUMBING				
RADON				
ROOFING				
SPRINKLER				
OTHER				

DESCRIPTION		SQ FT	
# OF BEDROOMS		# OF BATTHROOMS	
FOUNDATION TYPE			
FRAMING TYPE 1ST STORY			
FRAMING TYPE 2 ND STORY			
ATTACHED DECK			
DETACHED DECK			
COVERED PORCH			
GARAGE – ATTACHED			
STONE OR BRICK			
FIRE PLACE			
OTHER			`

Under penalty of intentional misrepresentation and/or perjury, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with the building codes, as adopted by Rock Island County. I agree this structure shall not be used, occupied or furnished in whole or in part until a *Certificate of Occupancy* is issued as required by law.

APPLICANT SIGNATURE	DATE
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