

# VILLAGE OF POPLAR GROVE BUILDING PERMIT APPLICATION



<b>PROJECT LOCATION:</b>		<b>PIN #</b>
<input type="radio"/> <b>COMMERCIAL</b> <input type="radio"/> <b>RESIDENTIAL</b>	<b>SUBDIVISION NAME:</b>	
<b>OWNER'S NAME</b>	<b>MAILING ADDRESS, CITY STATE ZIP</b>	<b>TELEPHONE</b>
<b>PERMIT REQUESTED</b>	<input type="radio"/> NEW CONSTRUCTION <input type="radio"/> HVAC <input type="radio"/> ELECTRICAL <input type="radio"/> PLUMBING <input type="radio"/> SIGN <input type="radio"/> OTHER: _____	<input type="radio"/> ROOF <input type="radio"/> FENCE <input type="radio"/> GARAGE/SHED <input type="radio"/> DRIVEWAY (Curb Cut) <input type="radio"/> DECK <input type="radio"/> SWIMMING POOL <input type="radio"/> WINDOWS
<b>PROJECT DESCRIPTION:</b>		<b>EST PROJECT COST</b>
<b>OWNER/CONTRACTOR EMAIL:</b>		
<b>CONTRACTOR NAME &amp; LIC #</b>	<b>ADDRESS</b>	<b>TELEPHONE</b>
<b>CONTRACTOR NAME &amp; LIC #</b>	<b>ADDRESS</b>	<b>TELEPHONE</b>
<i>The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, express or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all the above information is accurate</i>		
<b>SIGNATURE OF APPLICANT:</b> _____		<b>DATE:</b> _____
<b>ZONING DISTRICT</b>	<b>LOT AREA Sq Ft</b>	<b>SETBACKS</b> FRONT      REAR      LEFT      RIGHT
<b>APPROVAL CONDITIONS:</b> _____ Written _____ Attached  <b>PERMIT #:</b> _____		
<b>PERMIT ISSUED BY:</b> _____		<b>DATE:</b> _____
<b>FOR OFFICE USE ONLY</b> 01/00-3400 Application Fee: \$25 _____ 01/00-3400 Building Permit: _____ 01/00-3400 Electrical: _____ 01/00-3400 Plumbing: _____ 01/00-3400 HVAC: _____ 31/00-3602 Water Connect: _____ 31/00-3602 Sewer Connect: _____ 31/00-3604 Water Meter: _____ Escrow: _____ Other: _____  <b>TOTAL:</b> _____	<b>B &amp; F Construction Codes, Inc.</b> <b>(847) 428-7010</b>  <b>For Inspections:</b> <a href="mailto:inspectionrequests@bfccs.org">inspectionrequests@bfccs.org</a>  <b>Include your Permit #, Address, Project, &amp; Inspection Requested</b> <b>A 24 Hour Notice for all Inspections is required</b>	<b>RECEIPT</b>  CK/CSH _____/_____  AMOUNT: _____/_____  DATE: _____/_____  BY: _____/_____

Village of Poplar Grove 200 N. Hill Street, Poplar Grove, IL 61065 PHONE (815) 765-3201 FAX (815) 765-3571

**Permit Expires One Year from Date of Issue.**

*Note: the Village of Poplar Grove is included in the Enterprise Zone.*

**Commercial applicants should also contact Growth Dimensions at (815) 547-4252 for certificate information**