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City of Mendota, Illinois
Application for Building Permit
Bill Silfies, Building Inspector Phone: 815-910-9111

IMPORTANT - Applicant to complete all items in Sections I, II, III, IV and VI.

<u>l.</u> Location of Building					
Name of Owner:					
Street Address:	per Street				
Numb	per Street				
Between:	and ct Cross Street				
Subdivision: Lot: Block: Lot Size:					
II. Type and Cost of Building - All applicants complete parts A-D					
A. Type of Improvement	D. Proposed Construction Type				
☐ New Building	Residential	Nonresidential			
☐ Addition (if residential	☐ One Family	☐ Industrial/Manufacturing			
enter number of new housing units added, if any)	☐ Two or more family	☐ Stores/Retail			
☐ Alteration	☐ Garage/Carport	☐ Service station/repair garage			
☐ Repair; Replacement	□ Fence	☐ Hospital/Institutional/Schools			
□ Signs	□ Deck	☐ Office/Bank/Professional			
☐ Fence	□ Pool	☐ Signs			
□ Other	□ Other	-			
B. Ownership:	If nonresidential, describe in deta				
individual,	If nonresidential, describe in detail proposed use of building(s), e.g., food processing, plant, etc. If use of existing building is being changed, enter proposed use.				
□ Private corporation, nonprofit, etc.					
Federal, State or					
Public local government					
C. Value Cost of Improvements: (Omit Cents)					
a. Electrical					
b. Plumbing					
c. Heating, AC					
d. Walks, Drives,					
Decks, Landscape					
Total Cost of Project:					
III. Selected Characteristics of Building - New construction complete E-L. All others skip to IV.					
E. Principal Type of Construction	G. Type of Sewage Disposal	J. Dimensions			
□ Masonry □ Wood Frame	☐ City System ☐ Private	WideLong			
	_				
☐ Structural Steel	H. Type of Water Supply	exterior dimensionssquare feet			
☐ Reinforced Concrete	☐ City System ☐ Private	Total square footage of entire building - excluding basement. square feet			
☐ Other	I. Type of Mechanical	•			
		Number of floors above grade			
E. Principal Type of Heating Fuel	Will there be central air	Mean height above grade			
□ Gas □ Oil	conditioning?	Will there be a basement?			
	□ Yes	□ Yes			
□ Electricity	□ No	□ No			
□ Coal	Will there be an elevator?	If yes, will it be full or partial?			
☐ Other	□ Yes □ No	□ Full □ Partial			
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TOHAL SWILL		icant to complete all items in Sections I, II,	, III, IV and VI.
<u>IV.</u> Identification - To	be completed by all a		IT I I N I ()
	Name	Mailing Address	Telephone Number(s)
1. Owner or Lessee			
2. General Contractor			
3. Plumber			
4. Electrician			
5. Architect or Engineer			
-	ed persons and ar	ny subcontractors thereof agree	to conform to all applicable
the permit to by the Inspe the descri specifications install in str obey any and	construct, erect, a ctor of Buildings, a iption herein set for and plans herewing compliance with all lawful orders or said ordinances; a	endota, that for and in considera liter or install as above described and that the work thereon will be orthin this statement, and as more ith filed; and it is further agreed that the Building Ordinances of the file inspector of Buildings, made and also this application meets the state of the inspector of Buildings.	d, to be issued and granted e done in accordance with re fully described in the to construct, erect, alter or e City of Mendota; and to de or issued by virtue of the
	Orc	dinance of the City of Mendota.	
Signature of applicant or ag	ent.	Address.	Date.
	DO NOT	WRITE BELOW THIS	LINE.
V. Plan Review Reco	ord - For office use.		
District:			
Use:			
Frontyard:		Cidovard:	
Sideyard: Rearyard:		Sideyard:	_
Notes:			
Building Permit Issued	l:		
Building Permit Fee:			
Approved by:			
Bill Silfie	es, Building Inspector		Date



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VI. Sketch/Plan of Project. Please label and show all pertinent information.

