## Sangamon County Department of Public Health Building Safety Section

Application for Plan Examination And Building Permit

2833 South Grand Avenue East Springfield, Illinois 62703 Ph: (217)535-3145/Fax (217) 747-5103

Permit #

PROPERTY INFORMATI STREET ADDRESS:		CITY & 7IP	
CORNER LOT: YES		CH i & Zh	ZONING:
CORNER LOT. TES	NS: WIDTH1	IENCTU	LEIGUT(to mode)
SOLIADE ECOTACE OF THE	HE LIVING AREA	TOTAL SOLLADE I	COTACE
DARCEL NO.	PUB	LICWATED, VEC. NO.	DUDI IC CEWED, VEC. NO.
PARCEL NO:	PUB	LIC WATER: YES NO	PUBLIC SEWER: YES NO
DATE STAKED			
PROPERTY OWNER INF	ORMATION: 	PHONE #·	
STREET ADDRESS:			
E-Mail		C,5 & ZH	<del></del>
L-ivian			
	CONTRAC	CTOR INFORMATION	
	NAME, ADDRESS, CITY, STA	TE, ZIP	PHONE/FAX
GENERAL CONTRACTOR			
E-Mail Address			
ARCH/ENGINEER			
ELECTRICAL			
MECHANICAL			
PLUMBING			
	LICENS		
ROOFING	LICENS	E#	
Improvement type:	PROP	OSED USE:	
( ) New Construction (1)	Commercial	RESIDENTIAL	OTHER
( ) Addition (2)	( ) Theatre (1)	( ) Hotel, Motel (16)	<ul><li>( ) Private Garage(Inc. Elect.)</li><li>( ) Shed</li></ul>
( ) Alteration (3)\$30 min. fee J	per REMP ( ) Night Club (2)	( ) Multi – Family (17)	( ) Shed
( ) Relocation (6)	() Restaurant (3)	( ) IBC Two Family (19)	( ) Carport
( ) Foundation Only (7)	( ) Church (4)	( ) IBC Single Family (20	
( )	( ) Other Assembly (5)	( ) Modular Home	
		( ) Manufactured Home	
	( ) Beer Garden	( ) Manufactured Home	( ) Siding
	( ) Other		( ) Porch
	( ) other	<del></del>	( ) Roofing
		Note:	(Ice Barrier is a requirement R905.2.7.1)
		11010.	(100 Darrier is a requirement 1003.2.7.1)
	CERTII	FICATION	
authorized by the owner to make thi penalties of perjury, I hereby certify application. In addition, if permit fo	of record of the named property or that the is application as his authorized agent and l	ne proposed work is authorized by the I agree to conform to all applicable dill taxes and all other debts owed add, I certify that the code Official	federal, state, And local laws. Under I to Sangamon County as of the date of this or the code official's authorized
SIGNATURE OF APPLICANT	ADDRESS		PHONE NUMBER
510. WILLIOM OF MILLIOM (I	IDDILLOS		

## ▼ ▼ \*\*ASBESTOS AWARENESS NOTICE FOR DEMOLITION & RENOVATION PROJECTS\*\* ▼ ▼

The Illinois Environmental Protection Agency (IEPA) requires that building owners and contractors notify the IEPA a minimum of ten working days prior to demolition or renovation activities. Also, the Illinois Department of Public Health (IDPH) requires that building owners and contractors notify IDPH prior to renovation activities. Written verification of the disconnection of services from utility companies having jurisdiction and proof of notification to I.E.P.A. is required before a demolition permit application can be accepted by Sangamon County Building Safety Department. The I.E.P.A. may be contacted at (217) 782-3397, and the IDPH at (217) 782-4977.

DATE

Doutition	ıctural	EXTERIOR WA	LLS (check those applicable)
FRAMING (Check that applicable)Structural Partition			
SteelConcreteOther		SteelOther	
Identify:		Identify:	
MasonryWood		Masonry	Wood
Are any structural assemblies fabricated o	ff-site? YES	NO	
-			Tark Assa (Co. Co.)
Street frontage(Feet)			Lot Area (Sq. feet)
Front Setback (Feet)  Rear Setback (Feet)  Bed Room Full Baths			Building Area (Sq. feet) Parking Area (Sq. feet)
Left Setback (Feet)	Full Baths (Number) Partial Baths (Number)		Living Area (Sq. feet)
Right Setback (Feet)	Garages (Number		Basement Area (Sq. feet)
Height Above Grade (Feet)	Windows (Numb		Garage Area (Sq. feet)
Est. Cost of Const. \$	Fireplaces (Numb	,	Office/sales (Sq. feet)
Existing Residential Units (Number)	Enclosed Parking		Service (Sq. feet)
New Residential Units (Number)	Outside Parking		Manufacturing (Sq. feet)
Est. Start//	Est. Finish		Elevators/Escalators (Number)
SCOPE OF WORK- Explain in a			, ,
USE OF BUILDING-Explain in d	etail what the build	ing is being used	for. If for storage what is being stored
in the building.			
•			
	D. A. G.CDZGG		
NEW CONSTRUCTION ROA			
NEW CONSTRUCTION ROA Property is located on a State		or Townsh	ip Highway/Road
	, County		ip Highway/Road
Property is located on a State Is there currently a culvert on thi	, County s property? Yes		ip Highway/Road
Property is located on a State Is there currently a culvert on thi PLASTIC CULVERTS ARE NO	, County s property? Yes DT ALLOWED	s No	ip Highway/Road
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Sangamon County Department of Public Health Building Safety Section 2833 South Grand Ave. East Springfield, IL 62703 (217) 535-3145 (FAX) 747-5103

## REQUIRED INSPECTIONS

No work shall begin until you have received your permit. In addition, prior to start of any work or issuance of any permits for new structures, you must have your sewage disposal system approved by the Sangamon County Public Health Department (535-3100). A permit will be issued and work may begin after a zoning inspection has been done and approved and all required submissions have been received.

- 2 Zoning inspection will be conducted after our office is notified that the construction site is staked out.
- 2 Footings inspection is to be scheduled & approved **before** ordering concrete and pouring footings.
- Plumbing Ground Work inspection if applicable is to be scheduled & approved **before** concrete floor is poured.
- 4 Electrical Underground Service inspection if applicable is to be scheduled & approved **before** trench is back filled.
- 5 Mechanical Ground Work (in-floor heat) inspection if applicable is to be scheduled & approved **before** concrete floor poured.
- 6 All Electrical, Mechanical, and Plumbing Rough-in inspections must be scheduled & approved before all ceiling, side wall, insulation, sheet rock/plaster walls are installed.
- Fireplace and applicable duct work inspection to be scheduled & approved **before** insulation, sheetrock /plaster walls and ceilings are installed.
- 8 Framing inspection to be scheduled & approved **before** sheetrock /plaster and insulation are installed.
- 9 Insulation inspection to be scheduled & approved **before** sheetrock /plaster is installed.
- Gas line pressure test report is to be submitted to inspector & approved, if applicable, **before** concrete floor poured or prior to Ceiling, side wall insulation, sheet rock/plaster walls, and ceilings are installed if any portion of gas line is concealed.
- 11 Commercial ONLY:
  - A. Rough-in inspection of HVAC, Exhaust and Grease Duct(s) prior to duct wrap or zero clearance insulation.
  - 1) Light test on all grease ducts prior to wrap or enclosure. Ref: IMC 2006 506.3.2.5 Grease duct test. Duct(s) must accessible 360°
- 12 Electrical service/meter base entrance Inspection must be scheduled & approved **before** energizing.
- Final Building, Electrical, Mechanical, and Plumbing inspections are to be scheduled when all Systems are installed and functioning as designed. Plumbing fixtures installed and fully operational, Electrical devices, (lighting, smoke detectors etc.) installed and fully operational, Mechanical equipment, (furnaces, exhaust fans, detectors & alarms, etc.) installed and fully operational, Doors, windows and related hardware installed and fully operational.
- 11 Floor covering, painting and cosmetic finishes installations not required for final inspections.
- 12 Re-inspections for corrective work must be scheduled & approved **prior** to covering or concealing.
- 13 Other inspections may be required for your situation. Please contact this office if you are not sure or have any questions. **Phone # 535-3145**

Covering or concealing any of the above referenced work with permanent construction (concrete, sheetrock,
paneling, brick, siding etc.) will not relieve Owner/Contractor from securing those inspections.
You may be required to remove construction to allow for inspection.

All finals must be inspected and approved before a Certif	ficate of Occupancy will be issued. Occupa	ncy is
prohibited until the Certificate of Occupancy is granted.		

Signature:	Date:
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Please draw a sketch including the following:

- 1. Indicate the structure and how far away it sits from property lines.
- 2. Show other structures on parcel and distance way from proposed structure.
- 3. Show where the driveway will be.
- 4. Show septic & well location if applicable.

Please indicate the North point.