

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

Applicants must complete all sections: 1, 2, 3, 4 and 5.

1. LOCATION OF BUILDING OR CONSTRUCTION

AT (LOCATION) _____ ZONING DISTRICT _____

SUBDIVISION _____ LOT _____ BLOCK _____

LOT SIZE _____

2. TYPE AND COST OF BUILDING

A. TYPE OF IMPROVEMENT

- | | |
|---|---|
| 1 <input type="checkbox"/> New Building | 2 <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in part D, 13 |
| 3 <input type="checkbox"/> Alteration | 4 <input type="checkbox"/> Repair, replacement |
| 5 <input type="checkbox"/> Moving, relocation | 6 <input type="checkbox"/> Foundation only |

B. OWNERSHIP

- 1 Private (individual, corporation, nonprofit institution, etc.)
- 2 Public (Federal, State, or local government)

C. COST

1	Cost of Improvement	\$ _____
	(to be added but not included in the above cost)	
	a. Electrical	_____
	b. Plumbing	_____
	c. Heating, A/C	_____
	d. Other (elevator, etc)	_____
2	TOTAL IMPROVEMENT \$	_____

D. PROPOSED USE

Residential

- 12 One Family
- 13 Two or more family-# of units
- 14 Transient hotel, motel or dormitory
Enter # of units _____
- 15 Garage
- 16 Carport
- 17 Other-specify _____

Nonresidential

- | | |
|---|--|
| 1 <input type="checkbox"/> Amusement, recreational | 7 <input type="checkbox"/> Office, bank, professional building |
| 2 <input type="checkbox"/> Church, other religious | 8 <input type="checkbox"/> Public utility |
| 3 <input type="checkbox"/> Industrial | 9 <input type="checkbox"/> School, library, other educational |
| 4 <input type="checkbox"/> Parking garage | 10 <input type="checkbox"/> Stores, mercantile |
| 5 <input type="checkbox"/> Service station, repair garage | 11 <input type="checkbox"/> Tanks, towers |
| 6 <input type="checkbox"/> Hospital, institutional | 12 <input type="checkbox"/> Other, specify _____ |

3. SELECTED CHARACTERISTICS OF BUILDING

E. PRINCIPAL TYPE OF FRAME

- 1 Masonry (wall bearing) 2 Wood frame
 3 Structural steel 4 Reinforced concrete
 5 Other-specify _____

E. PRINCIPAL TYPE OF HEATING FUEL

- 1 Gas 2 Oil 3 Electricity 4 Coal 5 Other-specify _____

F. TYPE OF SEWAGE DISPOSAL

- 1 City 2 Private-specify type _____

G. TYPE OF WATER SUPPLY

- 1 City 2 Private- (well, cistern)

H. TYPE OF MECHANICAL

Will there be central A/C? Yes No Will there be an elevator? Yes No

I. DIMENSIONS

Number of stories _____ Total land area sq. ft. _____

Total square feet of floor area, all floors, based on exterior dimensions: _____

Basement _____ 1st Floor _____ 2nd Floor _____ 3rd Floor _____

K. NUMBER OF OFF STREET PARKING SPACES

Enclosed _____ Outdoors _____

L. RESIDENTIAL BUILDINGS ONLY

Number of bedrooms _____ Number of bathrooms: (full) _____ (partial) _____

4. IDENTIFICATION (To be completed by all applicants)

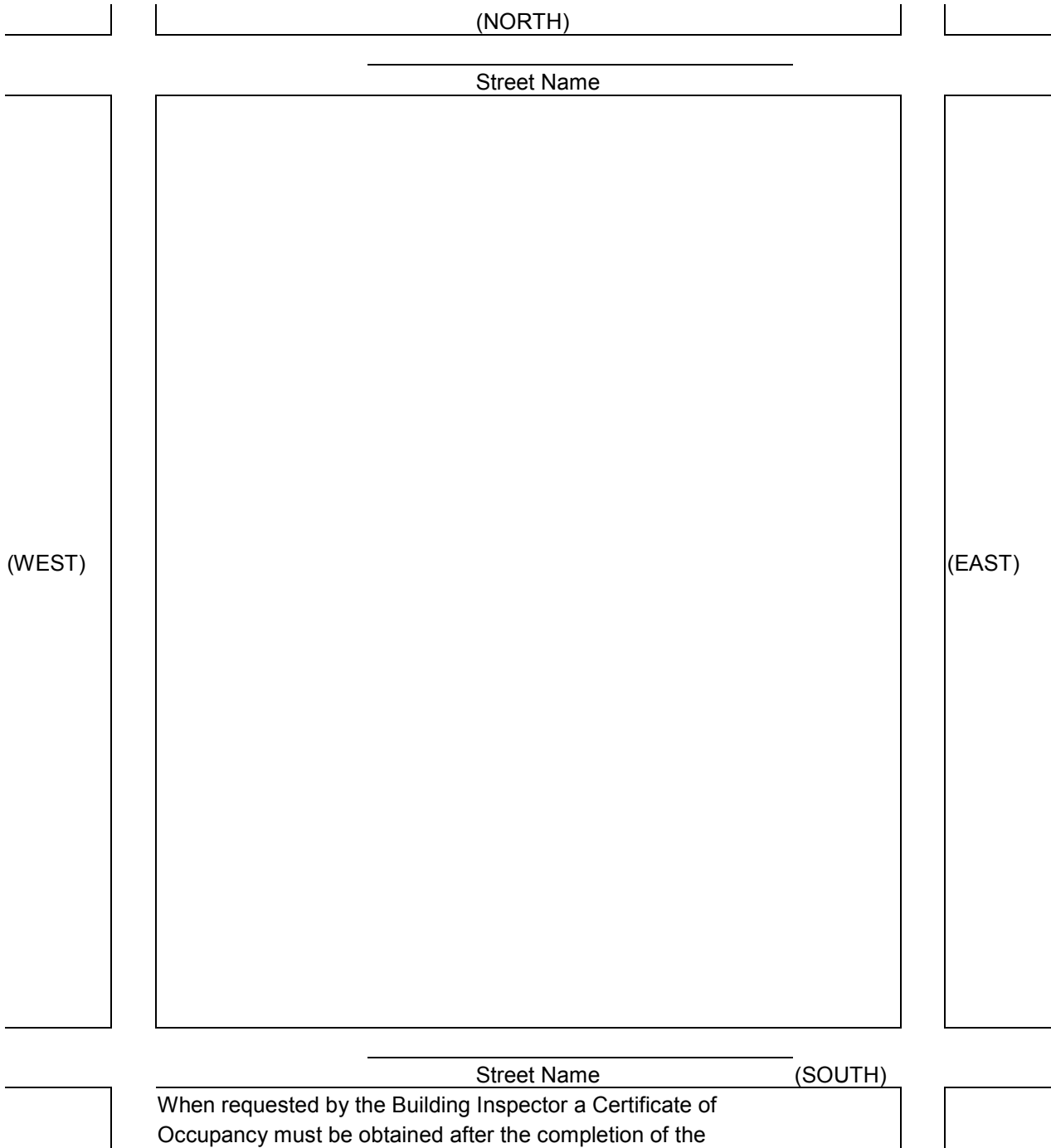
Name	Mailing Address	Phone
Owner or lessee		
Contractor		
Architect or Engineer		

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of applicant	Address	Application Date
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5. SITE, PLOT & FLOOR PLAN (must include all the following)

Each application for a building permit shall be accompanied by a plat, drawn to scale, showing the actual dimensions of the lot to be built upon, the size of the building to be erected, size and location of any secondary buildings, water and sewer tap locations, location of sidewalks, driveways, patios, and curb cuts. Direction of drainage and such other information as may be necessary to provide for the enforcement of these regulations. Must show set-back distances of construction from all lot lines and from all other structures. Floor plan showing all walls, doors, and windows. May use a separate sheet of paper if more room is needed for the drawings.



When requested by the Building Inspector a Certificate of Occupancy must be obtained after the completion of the building.

CONTRACTOR INFORMATION

	NAME OF CONTRACTOR	CITY - STATE	LICENSE #
Architect/Engineer			
Excavation			
Concrete			
Carpentry			
Electrical			
Plumbing			
Sewer			
Mechanical			
Roofing			
Masonry			
Drywall or Lathing			
Sprinkler			
Fire Alarm			
Paving			

For Building Inspectors Use Only – Do Not Fill In

Fee: \$ _____

Zone: _____ Permit No.: _____ Date: _____

APPROVED: _____
Building Inspector

DISAPPROVED:

Explanation: _____

AFFIDAVIT

I certify that all dimensions and measurements are true and accurate and no proposed building will encroach upon any public property or dedicated easement and that no proposed building will be constructed over any utility line (water, sewer, gas or electric) and that the proposed location of any building or structure will not be in violation of any provision of the concurrent zoning ordinance of the City of Olney.

Date: _____

Owner of Property

STATE OF ILLINOIS)
) SS
COUNTY OF RICHLAND)

I, _____, a Notary Public in and for the aforesaid County and State, do hereby certify that _____, whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he/she signed the said instrument as his/her free and voluntary act.

Given under my hand and seal this _____ day of _____, 20_____.

Notary Public

CITY OF OLNEY

CONSTRUCTION INSPECTION PROCEDURES

1. FOUNDATION INSPECTION

- Footing inspection prior to concrete pour
- Inspection of foundation after concrete pour

2. FRAMING INSPECTION

- After all framing, roof, fire stops and bracing are in place

3. PLUMBING, MECHANICAL AND ELECTRICAL

- Rough inspection prior to concealment and fixtures are set

4. LATH AND/OR WALL BOARD INSPECTION

- After wall board is in place, but before taping and finish is applied

5. PLUMBING, MECHANICAL AND ELECTRICAL

- Final inspection prior to services turn on

6. FINAL INSPECTION

- After building is complete and prior to occupancy (includes landscaping and clean up). A Certificate of Occupancy must be issued before occupancy can occur.

STREET AREA DURING CONSTRUCTION MUST BE CLEANED DAILY.

INSPECTIONS ARE PERFORMED MONDAY THRU FRIDAY. NONE ON HOLIDAYS.

REQUEST FOR INSPECTIONS MUST BE CALLED FOR ONE DAY PRIOR TO THE INSPECTION.

PHONE NUMBER: (618) 395-7302 (OLNEY CITY HALL)

CITY OF OLNEY

PLAN REQUIREMENTS FOR 1 & 2 FAMILY DWELLINGS

One set of plans shall be submitted. (Standard Plan Size 18" x 24" or 24" x 36"). This set of plans will not be returned. They will remain in the office of the Building Official of the City of Olney as part of that residence records.

1. PLOT PLAN
 - a. Location of house and any secondary buildings.
 - b. Lot dimensions.
 - c. Dimensions of structure from all lot lines.
 - d. Location and size of all service utilities including location of connection to City Sewer and Water Mains.
 - e. Location of all sidewalks, driveways, patios, and curb cut.
 - f. Direction of drainage.

2. FOUNDATION PLAN
 - a. Cross-section or detail of footing/foundation.

3. FLOOR PLAN OF EACH FLOOR
 - a. Detail dimensions.
 - b. Doors and windows schedule.

4. PLUMBING PLAN FOR EACH FLOOR
 - a. Pipe size and material.
 - b. Fixture schedule.

5. ELECTRICAL PLAN FOR EACH FLOOR
 - a. Wire size and type.
 - b. Fixture locations.
 - c. Switch locations.
 - d. Service entry location and size.
 - e. Location and size of distribution panel.
 - f. Location of smoke detectors.

6. HVAC PLAN FOR EACH FLOOR
 - a. Location, size, and type of furnace(s).
 - b. Location and size of ducts.

These guidelines are the minimum required. Additional drawings may be Required if plans do not provide enough detail to complete the City's review process.

CITY OF OLNEY

APPLICATION FOR TAP WATER

Applicant: _____

Address: _____

Water will be tapped at: _____

Size of Water Main: _____

Plumber: _____ License No.: _____

Fee: _____

Date Applied: _____ Receipt No.: _____

Approved: _____
Water Supervisor

Taken By: _____

RESIDENTIAL OR COMMERCIAL BUILDING SEWER APPLICATION

To the City of Olney:

A. THE UNDERSIGNED, being the _____
(Owner, Owner's Agent)
of the property located at _____
(Number) (Street)
DOES HEREBY REQUEST a permit to install and connect a building sewer to serve the
_____ at said location.
(Residence, Commercial Building, etc.)

1. The name and address of the person or firm who will perform the proposed work is _____, Illinois Plumbing License # _____.
2. Plans and specifications for the proposed building sewer are attached hereunto as Exhibit "A".
3. Size of pipe used: _____ Material used: _____

B. In consideration of the granting of this permit, THE UNDERSIGNED AGREES:

1. To accept and abide by all provisions of the City Code of the City of Olney and of all other pertinent ordinances or regulations that may be adopted in the future.
2. To maintain the building sewer at no expense to the City of Olney.
3. To notify the Sewer Supervisor when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered.

DATE: _____ SIGNED: _____
(Application)

\$ _____ permit and inspection fee paid. Receipt #: _____

Application approved and permit issued:

DATE: _____ SIGNED: _____
(Approving Authority)