

Village of Milan Building Permit Application 405 East 1st Street

Permit No. _____
Code Edition 2012 IBC
2012 IRC

Job Address _____
Property Owner _____
Address _____
City/State/Zip _____
Phone _____

(circle one) Residential Commercial

Describe Scope of Work: (complete reverse side if
new construction, addition, sprinkler, or demolition)

- ▶ Residential: Owner Occupied Y / N
Rental Property Y / N
- ▶ Tenant Name if Commercial _____

Developer
Contact Name _____
Address _____
Phone No. _____

Firm Preparing Plans:
Contact Name _____
Address _____
Phone _____

Registered Architect or Engineer:
Illinois Reg. No. _____

General Contractor
Contact Name _____
Address _____
Phone _____

Sprinkler Contractor
Address _____
Phone _____

Roofing Contractor
Address _____
Phone _____

Electrical Contractor
Address _____
Phone _____

Mechanical Contractor
Address _____
Phone _____

Plumbing Contractor
Address _____
Phone _____

	\$ Valuation		Fees
	Applicant	City	
Building	_____	_____	_____
Demolition	_____	_____	_____
Sprinkler	_____	_____	_____
Sign	_____	_____	_____
Electrical	_____	_____	_____
Mechanical	_____	_____	_____
Plumbing	_____	_____	_____
Sidewalk	_____	_____	_____
Approach/Curb Cut	_____	_____	_____
Total Job Cost	_____	_____	_____

Enterprise Zone (permit fees waived) Yes No

Other Fees
Plan Review Fees _____
Total Fees _____

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 Village of Milan Code of Ordinances. I realize that the information I have affirmed hereon forms a basis for the issuance of the building permit herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any Village of Milan Ordinance or to excuse the owner or his successors in title from complying therewith. The applicant agrees that 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.

Building Official _____	Date _____	Applicant Name (please print) _____
Zoning _____	Date _____	Applicant Signature _____
Fire _____	Date _____	Address _____
		City/State _____ Zip _____
		Phone _____ Cell _____