



Anne Kirby, Clerk  
407 South View Street  
P.O. Box 37  
Oreana, IL 62554

217-468-2476 (voice)  
217-468-2660 (fax)

## Application for Building Permit

### Applicant Information

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Evening Phone: \_\_\_\_\_

### Contractor Information

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City, State Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_  
Evening Phone: \_\_\_\_\_

### Permit Information (CHECK ALL THAT APPLY)

This permit is required to  construct  alter  replace  remove  
The following structure(s):  
 Single family dwelling  Multi-family dwelling  Garage (detached)  Deck / porch  
 Utility shed  Pool  Other:

Cost of Project: \$

Legal description of property: \_\_\_\_\_

Commonly known address: \_\_\_\_\_

This Application for Building Permit must be accompanied by a separate sheet of paper or a plat of survey showing 1) the outline and actual dimensions of the lot to be built upon, 2) the size, shape and location of all existing buildings, 3) the size, shape and location of all proposed alterations / new construction, and 4) other information as may be reasonably necessary for the enforcement of the Zoning Ordinance. The owner or contractor must sign this application and the plat. No building permit will be issued until these criteria are met.

Applicant Signature: \_\_\_\_\_

### Office Use Only

Application Number: \_\_\_\_\_ Approved:  Yes  No  
Set-Back Requirements: \_\_\_\_\_ Front \_\_\_\_\_ Rear \_\_\_\_\_ Side  
Permit Fee: \$ \_\_\_\_\_ Date Received: \_\_\_\_\_

Village Clerk Signature: \_\_\_\_\_

Date: \_\_\_\_\_