



BUILDING PERMIT APPLICATION

City of Morrison, Illinois

TO THE ENFORCING OFFICER OF THE CITY OF MORRISON ZONING ORDINANCE
200 W Main Street, Morrison, Illinois 61270-2400 (815) 772-7657

Applicant/Owner Name

Address

City State/Zip Phone (____) _____

Email Address

For Office Use Only

Fee Paid \$ _____

Date Paid _____

**Does the property lie within the
Historic District, National Register or
is it a locally designated landmark?**

YES or NO

(If YES, waive FEE)

Application is hereby made for a Building Permit and Certificate of Compliance involving the premises
legally described as follows:

Street Address _____

Subdivision _____

Unit _____ Block _____ Lot No. _____ Sec. _____ Twp. _____ Range _____

Structure Dimensions _____ (length) x _____ (width) = _____ ft²

Height _____

Lot Dimensions _____ x _____ = _____ ft²

Type of Lot Improvements (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Offices or Professional |
| <input type="checkbox"/> Alteration/Remodel | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> Single Family Residence | <input type="checkbox"/> Deck |
| <input type="checkbox"/> Two-Family Residence (Duplex) | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Multiple-Family Residence | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Institutional | <input type="checkbox"/> Other _____ |

Estimated Cost of Project: \$ _____

1. _____ (_____) _____
General Contractor Name Phone

Address City State/Zip

Complete additional information if applicable

2. _____ (_____) _____
Architect/Engineer Phone

Address City State/Zip

3. _____ (_____) _____
Excavator Phone

Address City State/Zip

4. _____ (_____) _____
Roofing Contractor Phone

Address City State/Zip

5. _____ (_____) _____
Carpenter Phone

Address City State/Zip

6. _____ (_____) _____
Plumbing Contractor Phone

Address City State/Zip

7. _____ (_____) _____
Electrical Contractor Phone

Address City State/Zip

NOTE: *** The proposed construction MUST BE staked out. ***

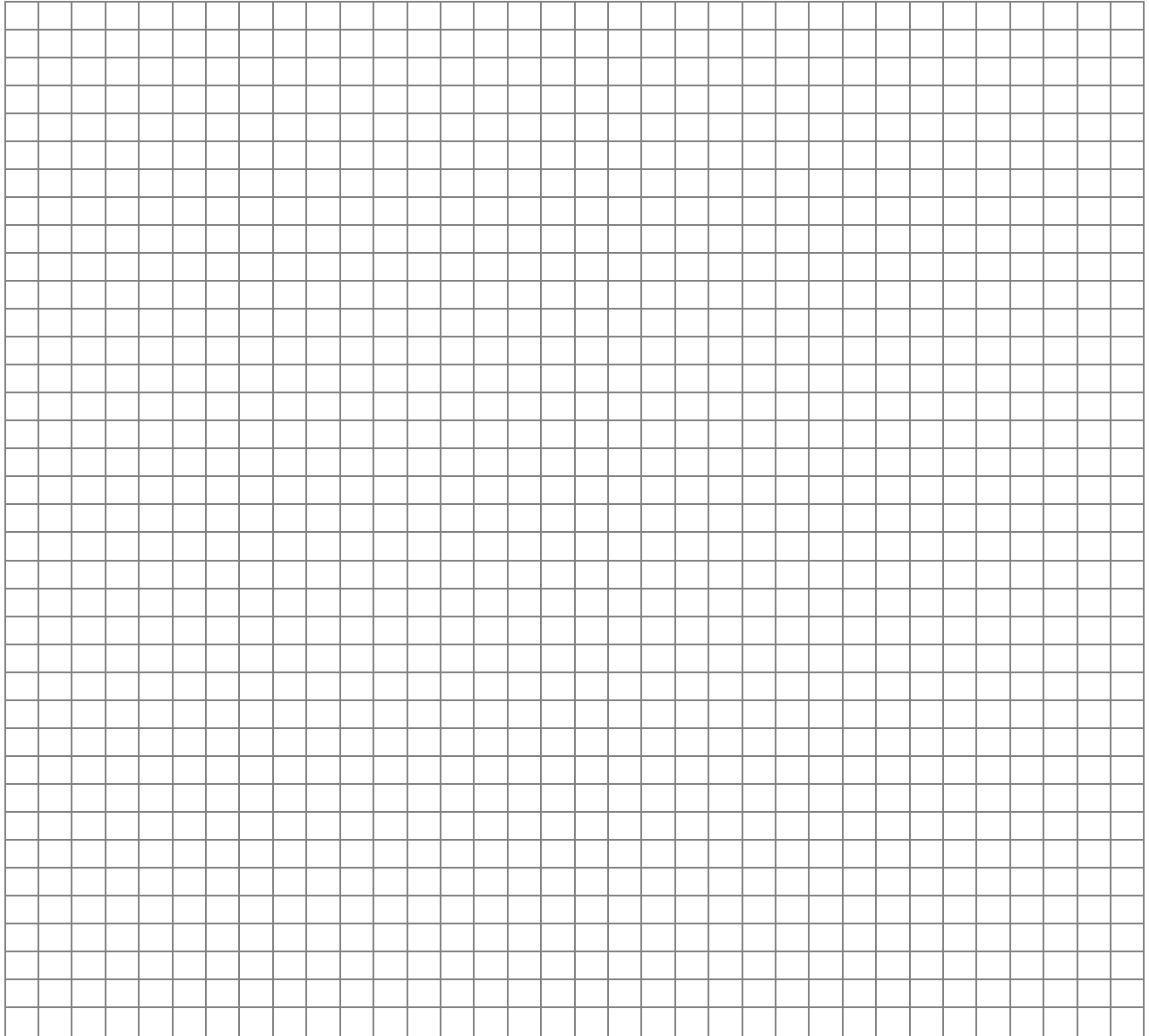
(Please Circle One)

- | | | | |
|------------|-----------|------------|---|
| YES | NO | 1. | Have you included your legal description? |
| YES | NO | 2. | Show your lot dimensions. |
| YES | NO | 3. | Does your application include a parking plan? |
| YES | NO | 4. | What is your property zoned - Zoning is _____ |
| YES | NO | 5. | Included all existing and requested building dimensions. |
| YES | NO | 6. | Will this construction cover water or sewer lines? |
| YES | NO | 7. | Does this construction comply with front, side, and rear yard setbacks? |
| YES | NO | 8. | Does your construction require a water permit?
_____ Permit Number |
| YES | NO | 9. | Does your construction require a sewer permit?
_____ Permit Number |
| YES | NO | 10. | Does your property lie within the Historic District? |
| YES | NO | 11. | Is your property on the National Register? |
| YES | NO | 12. | Is your property a Locally Designated Landmark? |
| YES | NO | 13. | Does your construction require a Certificate of Appropriateness? |

ADDITIONAL NOTE: A certified survey of your property may be required before issuance of a permit.

****Include all of the following in the drawing below:****

- Dimensions of the lot
- Location & dimensions of all existing buildings & structures (*Mark with X*)
- Location & dimensions of all proposed buildings & structures (*Mark with P*)
- Distances to property lines for all proposed buildings & structures
- Location of water supply lines
- Location of sewerage disposal system
- North arrow



NOTICE TO APPLICANT: Location of buildings or structures must be staked out on the property as shown above. This will be checked before permit is issued. Construction must not be started until permit is issued. No changes in location as shown above may be made without first contacting City Hall.

The dimensions of the lot and location of all existing and proposed buildings and structures are shown on the drawing on page 4 of this form (or indicated on an attached site plan) and is made a part of this application.

I declare that the above and attached information is correct and agree in consideration of and upon issuance of a building permit to do or allow to be done only such work as is herewith applied for, and that such premises and its existing and proposed building or structures shall be used or allowed to be used for only such purposes as are set forth above or other uses permitted.

I hereby acknowledge that I have been informed by the City of Morrison that it is solely my responsibility to determine the exact location of my property line(s) and that the issuance of a building permit is in no way agreeing with or validating my determination of property lines.

I FURTHER DECLARE THAT THE BUILDINGS AND USE OF THE LAND COMPLIES WITH ALL OF THE PROVISIONS OF THE ZONING ORDINANCE OF THE CITY OF MORRISON, ILLINOIS, AND THAT I WILL HOLD HARMLESS THE CITY OF MORRISON, ILLINOIS, FROM ANY PRESENT OR FUTURE PROPERTY LINE DISPUTES WHICH MAY RESULT FROM THIS ZONING ACTION. After the structure is completed, a separate Certificate of Compliance will be issued after an inspection of the premises and completed structure as described in the Zoning Ordinance.

Name of Applicant/Owner _____

Signature of Applicant/Owner _____

Date _____

**The Petitioner must submit a completed application to the City along with the \$35 fee plus \$2 for every \$1000 of estimated improvement cost.

Permit Approved	Permit Denied
By _____	
Title _____	Date _____

Explanation _____
