



CITY OF JACKSONVILLE ILLINOIS

DEPARTMENT OF ZONING, INSPECTION AND CODE ENFORCEMENT

200 WEST DOUGLAS JACKSONVILLE, ILLINOIS 62650-2094 (217) 479-4620 FAX: (217) 479-4640

APPLICATION FOR BUILDING PERMIT IMPORTANT - Applicant to complete all items in sections I, II, III, and IV

I. Location of Building: Subdivision _____ Zoning District _____ Lot _____ Lot Size _____

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

- 1 __ New Building
2 __ Addition (if new residential, enter number of New housing units added if any Part B, 11)
3 __ Alteration
4 __ Repair, replacement
5 __ Wrecking (if multi family enter number of units in building in Part B, 13)
6 __ Moving (relocation)
7 __ Foundation only

C. PROPOSED USE - For "wrecking" most recent use

- Residential: 10 __ One Family, 11 __ Two family or more, Enter number of units, 12 __ Transient hotel, motel or Dormitory, Enter number Of units, 13 __ Garage, 14 __ Carport, 15 __ Other - Specify
Non-Residential: 16 __ Amusement, Recreational, 17 __ Church, other religious, 18 __ Industrial, 19 __ Parking garage, 20 __ Service station, repair garage, 21 __ Hospital, institutional, 22 __ Office, bank, professional, 23 __ Public Utility, 24 __ School, library, educational, 25 __ Stores, mercantile, 26 __ Tanks, towers, 27 __ Other - Specify

B. OWNERSHIP

- 8 __ Private (individual, corporation, non-profit institution)
9 __ Public (Federal, State, Local Government)

D. COST

- 28 a. Electrical \$
b. Plumbing
c. Heating, air conditioning
d. Other (elevator, fire system)
e. All other cost (including labor & material)

Additional notes for proposed use: _____

29 Total Cost of Improvement \$ _____

III. SELECTED CHARACTERISTICS OF BUILDING -For new building and addition, complete E - L. For wrecking complete only part G, for all others skip to IV

E. PRINCIPAL TYPE OF FRAME

- 30 __ Masonry
31 __ Wood frame
32 __ Structural steel
33 __ Reinforced concrete
34 __ Other - Specify

F. TYPE OF SEWAGE

- 35 __ Public or private company
36 __ Private (septic tank etc.)

H. DIMENSIONS

- 39 Height
40 Number of stories
41 Total square feet of floor area, all floors, based on exterior dimensions
42 Total Land area, sq. ft.

G. TYPE OF WATER SUPPLY

- 37 __ Public or private company
38 __ Private (well, cistern)

I. PRINCIPAL TYPE OF HEATING FUEL

43 __ Gas
44 __ Oil
45 __ Electricity
46 __ Other, Specify _____

K. MECHANICAL

49 Will there be central air conditioning? Yes ____ No ____
50 Will there be an elevator? Yes ____ No ____

J. NUMBER OF OFF STREET PARKING

47 Enclosed _____
48 Outdoors _____

L. RESIDENTIAL BUILDINGS ONLY

51 Number of bedrooms _____
52 Number of bathrooms Full _____ Partial _____

IV. IDENTIFICATION - To be completed by all applicants

Name	Mailing Address	Telephone
Owner or Lessee _____	_____	_____
General Contractor _____	_____	_____
Sub Contractors _____	_____	_____
Architect/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 and codes of this jurisdiction.

Signature of applicant _____ Address _____ Date _____

NOTES AND DATA - For Department Use Only

NOTES: _____

VALIDATION - For Department Use Only

Construction Type _____ Use Group _____ Fire Grading _____ Live Load _____ Occupancy Load _____

Building Permit Number _____ Date Issued _____ Building Permit Fee \$ _____

Approved By: _____, Title _____

ZONING PLAN EXAMINERS NOTES

District _____ Use _____ Lot Coverage _____ Height _____

Front Yard _____ Side Yard _____ Side Yard _____ Rear Yard _____

Variance _____

Notes: _____

CONSTRUCTION DETAIL

- | | | | |
|----|--|-----|--|
| 1 | Roof pitch _____ in 12 | 22. | Floor Insulation R-value (R-19 minimum)
R- _____ |
| 2 | Roof Sheathing _____ | 23 | Foundation Insulation _____ |
| 3 | Roof Trusses _____ | 24 | Depth of footings (36" minimum)
If basement, how far below grade _____ |
| 4 | Roof Rafters 2 x _____ @ x _____ length | 25 | Footing Thickness _____ |
| 5 | Ceiling joists 2 x _____ @ x _____ length
16" o.c. _____ 24" o.c. _____ N/A _____ | 26 | Footing Width _____
Reinforcing Rebar Size _____
Rebar Spacing _____ |
| 6 | Attic Insulation R-Value (R-49 minimum)
R- _____ | 27 | Ground cover under crawl space
Sand _____ Rock _____
Visqueen _____ N/A _____ |
| 7 | Vapor Barrier Yes _____ No _____ | 28 | Ground cover under slab-on-grade
construction, or basement floor
Sand _____ Rock _____
Visqueen _____ N/A _____ |
| 8 | Framing Studs
Size 2x4 _____ 2x6 _____
Spacing 16" o.c. _____ 24" o.c. _____ | 29 | Drain tile around foundation
Inside _____ Outside _____ |
| 9 | Exterior Sheathing _____ | 30 | 1/2 Anchor Bolts at 6'0" o.c. are
required: 7" embedment for concrete
block, and 7" embedment for concrete
anchor bolt length _____ |
| 10 | Wall insulation R-Value (R-20 minimum)
R- _____ | 31 | Finished basement _____
Unfinished Basement _____
Crawl _____ |
| 11 | Vapor Barrier Yes _____ No _____ | 32 | Smoke detectors are required in each
bedroom and immediately outside of each
area, and each level of the structure No.
of smoke detectors _____ |
| 12 | Subfloor Sheathing _____ | 33 | Bedroom egress windows are required
No. of egress windows _____, opening
size (minimum 5.7 sq. ft. openable area) |
| 13 | Box Sill 1x _____ 2x _____ | 34 | Stairs, Handrails and Guards -Residential
Riser Height (maximum 7 3/4) _____
Tread Depth (minimum 10") _____
Handrail Height _____
Guard Spacing _____ |
| 14 | Box Sill insulation R-Value R- _____ | | |
| 15 | Floor Trusses
Size _____ Spacing _____ | | |
| 16 | Floor joist
Size 2x _____ @ x _____ length
Spacing 16" o.c. _____ 24" o.c. _____ | | |
| 17 | Sill Plate (must be treated) 2x _____ | | |
| 18 | Sill sealer is required Type _____ | | |
| 19 | Termite Shield or Soil Treatment Required.
Termite Shield _____
Soil Treatment _____ | | |
| 20 | Foundation
Block _____ Concrete _____ | | |
| 21 | Foundation Coating _____ | | |

LOCATION OF PROPERTY LINES, EASEMENTS AND RIGHTS OF WAY ARE THE RESPONSIBILITY OF THE OWNER AND/OR APPLICANT.

Indicate on plan all streets, easements and North arrow.

