



Building Dept. for Questions 247-428-7010

APPLICATION FOR PERMIT
815-784-5572

Permit No: _____

Village of Kingston

County: DeKalb Job Cost: _____

Permittee (Owner): _____

Address of Property: _____ Sub div: _____

Real Estate Index No: _____ Lot #: _____ Zoning Dist.: _____ Block #: _____

Phone #: _____ Cell #: _____ Email: _____

Owner Address if Different then Property: _____

A plat of Survey must accompany all permit applications for construction of any new structure or addition/change to existing structures, including decks, swimming pools, fences, etc. Projects such as roofing or residing do not require a Plat of Survey.

Purpose of Permit: _____

Required Licenses: Plumbing, Plumbing Contractor & Roofing License (Please include copy)

Dimension - 1st Floor: Front _____ Depth _____ Height _____ Sq. Ft. _____

Dimension - 2nd Floors: Front _____ Depth _____ Height _____ Sq. Ft. _____

Total Sq. Ft. of Bldg.: _____ Total Vol. of Bldg.: _____ Garage Attached _____ Detached _____

Number of Rooms: _____ Number of Bedrooms: _____

Architect _____ Address _____ Phone _____

General Contractor _____ Address _____ Phone _____

Carpenter _____ Address _____ Phone _____

Electrical Contractor _____ Address _____ Phone _____

Mechanical Contractor _____ Address _____ Phone _____

Plumbing Contractor _____ Address _____ Phone _____

Roofing Contractor _____ Address _____ Phone _____

Fire Protection System _____ Address _____ Phone _____

Other Contractor _____ Address _____ Phone _____

UNDER PENALTIES OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it true and correct to the best of my knowledge and belief. I agree to construct said improvement on compliance with all provisions of the Building and Zoning Ordinance s and all amendments thereto. I realize that the information that I have affirmed hereon forms a basis for the issuance of a building permit

Signature: _____ Date of Application: _____

DO NOT OCCUPY BUILDING UNTIL INSPECTION HAS BEEN PERFORMED AND A CERTIFICATE OF OCCUPANCY IS ISSUED
The applicant of this Permit agrees to pay all Plan Review fees whether they receive a permit or not.

PERMIT CONDITIONS: _____

Approved By: _____ Date: _____ Fee: _____

RECEIVED: _____ ISSUED: _____ COMPLETED: _____