

# Village of Hanna City

313 N. First Street, P.O. Box 492  
Hanna City, Illinois 61536-0492

Phone 309/565-7411

Fax 309/565-4389

## BUILDING PERMIT APPLICATION

**To the applicant:** Please complete this application in its entirety as to what applies to your project. Attach a drawing of your lot boundaries along with the location of your building. Please indicate distances and size on your drawing. Please allow 5 – 7 business days for review. THANK YOU

PROPERTY OWNER NAME & ADDRESS CONTRACTOR NAME & ADDRESS (if other than owner):

\_\_\_\_\_;

PHONE: \_\_\_\_\_

CONSTRUCTION SITE PARCEL ID NUMBER: \_\_\_\_\_

CONSTRUCTION SITE 911 ADDRESS: \_\_\_\_\_

An address must be assigned to the parcel by the County Clerk's Office, Rm. 101, before we can issue any building permits.

Roofers Certificate #: (State requirement for new homes) E.C. Permit #:

PL Permit #: PL EL Permit #: EL HV Permit #: HV

A copy of Illinois plumbing license & State plumbing contractor's license is required for work completed by anyone other than homeowner.

Water Supply: \_\_\_\_\_ PUB WATER – SUPPLIER

Sewer Supply: \_\_\_\_\_ PUB SEWER – AGENCY

Proof of Service is required prior to issuance of building permit.

ESTIMATED COST OF CONSTRUCTION: \$ \_\_\_\_\_

STRUCTURE TYPE: \_\_\_\_\_ HOUSE – Conventional \_\_\_\_\_ GARAGE – Attached \_\_\_\_\_ FENCE  
\_\_\_\_\_ DECK / PORCH \_\_\_\_\_ HOUSE – Modular/Log \_\_\_\_\_ GARAGE – Detached MOVING  
\_\_\_\_\_ SHED HOUSE – Mobile \_\_\_\_\_ GARAGE – Addition \_\_\_\_\_ DEMOLITION  
\_\_\_\_\_ AG BLDG. \_\_\_\_\_ HOUSE – Addition \_\_\_\_\_ DUPLEX \_\_\_\_\_ OTHER

### STRUCTURE DIMENSIONS:

TOTAL AREA: \_\_\_\_\_ sq ft.

# OF STORIES: \_\_\_\_\_

TOTAL HEIGHT: \_\_\_\_\_ (ground to peak)

Principal x sq ft: \_\_\_\_\_ ft \_\_\_\_\_ in

Basement area x sq ft: \_\_\_\_\_ ft \_\_\_\_\_ in

Gar/Shed x sq ft \_\_\_\_\_ ft \_\_\_\_\_ in

Deck/Porch x sq. ft: \_\_\_\_\_ ft \_\_\_\_\_ in

Fence/Other \_\_\_\_\_ ft \_\_\_\_\_ in

TYPE: \_\_\_\_\_ Basement \_\_\_\_\_ Crawl \_\_\_\_\_ Slab Basement Finished: \_\_\_\_\_ Yes \_\_\_\_\_ No

FOUNDATION MATERIAL: \_\_\_\_\_ Block \_\_\_\_\_ Poured \_\_\_\_\_ Gravel \_\_\_\_\_ Dirt \_\_\_\_\_ Other

WALLS: \_\_\_\_\_ Drywall \_\_\_\_\_ Plaster \_\_\_\_\_ Unfinished \_\_\_\_\_ Other:

**BUILDING PERMIT APPLICATION**

**BEDROOMS:** # Existing \_\_\_\_\_ : # To be added \_\_\_\_\_ : TOTAL: \_\_\_\_\_

**BATHROOMS:** # Existing \_\_\_\_\_ : # To be added \_\_\_\_\_ : TOTAL: \_\_\_\_\_

**HEAT:** \_\_\_ Electric \_\_\_ Gas \_\_\_ Geothermal \_\_\_ Wood \_\_\_ Solar \_\_\_ None \_\_\_ Other

**FIREPLACE:** \_\_\_ Yes \_\_\_ No

**WHIRLPOOL:** \_\_\_ Yes \_\_\_ No

**CENTRAL AIR:** \_\_\_ Yes \_\_\_ No

**INTERIOR FLU TYPE:** \_\_\_ Brick \_\_\_ Direct Vent \_\_\_ Metal asbestos \_\_\_ Other:

**PLUMBING FIXTURES:** # Existing \_\_\_\_\_ : # To be added \_\_\_\_\_ : TOTAL: \_\_\_\_\_

Fixtures include: floor drains, water heaters, bidets, lavatories, bathtubs, sinks, toilets, showers, washers, floor drains, sewage ejector

**WALLS:** \_\_\_ Aluminum \_\_\_ Brick \_\_\_ Metal \_\_\_ Vinyl \_\_\_ Wood \_\_\_ Combo \_\_\_ Other

**EXTERIOR ROOF:** \_\_\_ Asphalt Shingle \_\_\_ Tile \_\_\_ Concrete \_\_\_ Slate \_\_\_ Metal \_\_\_ Wood \_\_\_ Other

**I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE DATE

\_\_\_\_\_  
PRINT NAME

For office use only:  
Zoning Classification: Parcel Size:  
Side setbacks: Structures on property:  
Rear setbacks: Reviewed by: date:  
Road type/setbacks: