

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 with the size of your lot along with the location of your building. Please indicate distances and size on your drawing. Please allow 7 business days for review.

* If work has not commenced within 180 days of permit issuance, permit may be extended provided that no changes have been made or will be made to original construction documents. Completion of work shall not exceed one year. Permit may be extended for up to one year for 1/2 of initial fee. A permit shall not be extended more than once.

PROPERTY OWNER NAME & ADDRESS _____ PHONE: _____

CONTRACTOR NAME & ADDRESS (if other than owner): _____

CONSTRUCTION SITE PARCEL ID NUMBER (PIN): _____

CONSTRUCTION SITE E-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 _____ HOUSE – Modular/Log _____ HOUSE – Mobile _____
DUPLEX _____ APARTMENT _____ HOUSE ADDITION _____
GARAGE – Attached _____ GARAGE – Detached _____ SHED _____ AG BLDG. _____
DECK / PORCH- Attached _____ DECK / PORCH- Detached _____ FENCE _____ DEMOLITION _____
ELECTRICAL UPGRADE _____ GENERATOR _____ OTHER _____

STRUCTURE DIMENSIONS:

TOTAL AREA: _____ sq. ft.

OF STORIES: _____

TOTAL HEIGHT: _____ (ground to peak)

Principal area x sq ft: _____ sq. ft. SIZE _____ (width) X _____ (length)

Basement area x sq ft: _____ sq. ft. SIZE _____ (width) X _____ (length)

Gar/Shed x sq ft _____ sq. ft. SIZE _____ (width) X _____ (length)

Deck/Porch x sq. ft: _____ sq. ft. SIZE _____ (width) X _____ (length)

Fence/Other _____ ft _____ in

TYPE: _____ Basement- Basement Finished: _____ Yes _____ No Crawl space _____ Slab _____

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FOUNDATION MATERIAL: ___ Block ___ Poured ___ Gravel ___ Dirt ___ Other

WALLS: ___ Drywall ___ Plaster ___ Unfinished ___ Other:

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:
Side setbacks:
Rear setbacks:
Reviewed by:

Parcel Size:
Structures on property:
Road type/setbacks:
Date:

Updated: 3/2019