

HARD SURFACE PERMIT APPLICATION FORM

Permit Number (Office Use Only): _____

Inspection Date: (Office Use Only): _____

Permit Issued (Office Use Only): _____

CITY OF WEST PEORIA

2506 West Rohmann Avenue

West Peoria, Illinois 61604

Phone: (309) 674-1993 / Facsimile: (309) 674-6010

ALL FEES ARE NON-REFUNDABLE

_____ This application will not be accepted unless all required information is completed. _____

PROJECT LOCATION:

Address: _____ Tax Identification: _____

00-00-000-000

Own Rent If Applicant rents the location, Homeowner must authorize this application.

RESIDENT'S NAME

Full Name(s): _____

Phone Number: _____ Application Date: _____

HOMEOWNER'S NAME

Full Name(s): _____

Address: _____ Phone Number: _____

Other Phone: _____ Application Date: _____

GENERAL CONTRACTOR NAME

1. Full Name(s): _____

Address: _____ Phone Number: _____

Other Phone: _____ Facsimile: _____

2. Full Name(s): _____

Address: _____ Phone Number: _____

Other Phone: _____ Facsimile: _____

I PROPOSE TO:

Purpose of Hard Surface: Replace Add

Type of Hard Surface: Concrete 4 inches White Rock Black Top Brick
(Specify Type): _____

Driveway Replacement Yes No Front Entrance or Rear Entrance

Present zoning of Property: _____

Estimated starting date: _____

Property Lot Size: _____ ft by _____ ft
Size of Primary Structure: _____ ft by _____ ft
Size of Accessory Structure #1: _____ ft by _____ ft
Size of Accessory Structure #2: _____ ft by _____ ft

Submit the following items with this application:

- 1. A plat of the property, if applicable.
- 2. A site plan of the property.
- 3. The legal description.
- 4. The appropriate fee.

Note: Upon approval of permit: "JULIE" must be notified before any work can be done at 1-800-892-0123

Submit a site plan of the property:

- 1. Location and dimensions of all buildings, including accessory structures such as detached garages/storage sheds and attachments such as porches, decks, and patios with pertinent setback lines.
- 2. Distance from property lines to existing property structures, including distance from the accessory structure and other structures.
- 3. Dimensions of property.

Are there other hard surfaces on premises? Yes No

If yes, describe type and location: _____

All permits expire Six (6) months from date/time permit is issued.

Note: Other permits may be required after first inspection.

****You must call West Peoria Zoning Department for final inspection date.**

I, undersign, hereby request the City Council of West Peoria grant a permit as provided by the Zoning Ordinance for the City of West Peoria, Illinois, as amended to date.

Homeowner: _____ Printed name: _____
Signature Date

Applicant: _____ Printed name: _____
Signature Date

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE:

Received by: _____

Date: _____

Fee Collected: _____

Inspector #1: _____

Signature

Date

Title: _____

Position

Inspector #2: _____

Signature

Date

Title: _____

Position

Zoning Department: _____

Signature

Date

PERMIT APPROVED:

Yes

No

Site Plan of property:
(Below)