

**City of Rolling Meadows  
Community Development Department  
Building Permit Amendment Form**

\* THIS FORM IS TO BE ATTACHED TO THE ORIGINAL PERMIT APPLICATION. \*

Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_ UNIT/SUITE #: \_\_\_\_\_

NAME OF OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

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Provide a detailed description of change(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Valuation of change: (+ or -) \$ \_\_\_\_\_

*The owner/agent/contractor hereby releases the City of Rolling Meadows from any and all liability and agrees to hold the City of Rolling Meadows, its agents and employees, harmless from any and all claims, demands or actions resulting from or arising out of the action taken by the City of Rolling Meadows in respect to the above referenced permit and the amendment that is hereby requested.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Indicate:  owner  agent  contractor

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

Accepted: \_\_\_\_\_  
Chief Building Official/Assistant  
Community Development Director

\_\_\_\_\_  
Date

Review Fee: \$ \_\_\_\_\_

Add'l. Permit Fee: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Revised: 10/27/11