



COMMUNITY DEVELOPMENT DEPARTMENT
PERMIT & INSPECTION DIVISION
 3600 Kirchoff Road Rolling Meadows IL 60008
 (847) 506-6030 www.cityrm.org

APPLICATION FOR BUILDING PERMIT

Job Address: _____ Suite #: _____

Owner or Tenant's Name: _____ Phone No.: _____

Developer's Name: _____ Lot: _____ Subdivision: _____

Township: (Check One) Palatine Elk Grove Schaumburg Wheeling

Real Estate Index No.: _____ Flood Plain Zone: _____ Zoning: _____

WORK TO BE PERFORMED (Check all that apply)

- New Construction Single Family Multi-Family Commercial/Industrial
 Addition Alteration/Remodeling Accessory Building Fire Protection (sprinklers)

PROPOSED CONSTRUCTION (Commercial or Industrial)

International Code Construction Type _____ International Code Use Group _____
 Number of Stories _____ Building Height _____
 Building Width _____ Building Length _____
 Design Occupant Load _____ Type of Sprinkler System _____
 Total Square Feet _____ Number of Baths _____

PROPOSED CONSTRUCTION (Residential)

Number of Stories _____ Building Height _____
 Building Width _____ Building Length _____
 Number of Bedrooms _____ Number of Baths _____
 Total Square Feet _____ Number of Dwelling Units _____

VALUATION OF JOB: \$ _____

Having submitted plans and specifications, I hereby apply to the Community Development of the City of Rolling Meadows, IL for a permit. If this permit is granted, I will comply with all ordinances relating to the permit and pay all required fees. I will submit the work to the required inspections and prohibit the occupancy of any space until a Certificate of Occupancy has been obtained from the Community Development Department. No error or omission in either application or plans, whether said application or plans have been approved by the Community Development Department or not, shall permit or relieve the applicant from constructing the work in any manner than that provided for in the ordinances of the City relating thereto.

Applicant Name Owner Contractor
*If agent or contractor for the owner, I certify that I am duly authorized to apply on owner's behalf

Owner or Contractor's Signature _____

Company Name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Date _____

Permit Authorized by _____

Date _____

Project #: _____

Permit #: _____