

BUILDING PERMIT APPLICATION

City of Park Ridge, Illinois
Department of Community Preservation and Development
505 Butler Place, Park Ridge, Illinois 60068
tel 847-318-5291 fax 847-318-6411 www.parkridge.us

PROJECT INFORM	IATION		
Project address			
Project description			\$
Project square footag	ge / dimensions		Project cost
PROPERTY OWNE	R INFORMATION		
Property owner name	2		
Property owner maili	ng address		
Property owner e-ma	il		
Property owner telephone (primary) Telephone (secondary)		e (secondary)	
APPLICANT / AGE	NT INFORMATION (i	f different from property owner	r)
Applicant name			
Applicant address			
Applicant e-mail			
Applicant phone (primary)			Applicant Phone (secondary)
Fax or additional conf	tact instructions		
Applicant is:	Property owner Tenant	General contractor Design professional	☐ Attorney ☐ Other
CERTIFICATION			
of and upon issuance declare that I am the	of a building permit, to	do or allow to be done only such wor wise authorized by the property ow	knowledge and I agree, in consideration rk as herewith applied for. I further ner to apply for this permit. I agree to
Applicant / agent sign	nature	Applicant / agent name, printed	Date

	OFFICIAL USE		
TYPE AND NAME OF CONTRACTOR ADDRESS AND PHONE	CL	INS	OL
GENERAL			
CARPENTRY			
CONCRETE/PAVING			
DRYWALL			
ELECTRICAL			
EXCAVATING			
FENCE			
FIRE ALARM			
FIRE SPRINKLER			
HVAC			
IRRIGATION			
LANDSCAPING			
MASONRY			
PLUMBING			
ROOFING			
SEWER SERVICE			
WATER SERVICE			
SIDING			
SIGN			
TREE SERVICE			
WASTE HAULER			
WRECKING			
OTHER			