



Date Received:

9500 Belmont Avenue · Franklin Park, Illinois 60131 (847) 671-8245, FAX # (847) 671-8790

Reviewed By/Date:

Bldg: \_\_\_\_\_  
 HVAC: \_\_\_\_\_  
 Plumb: \_\_\_\_\_  
 Fire: \_\_\_\_\_  
 Hlth: \_\_\_\_\_  
 Eng: \_\_\_\_\_

## FIRE PERMIT APPLICATION

(COMPLETE ALL SHADED AREAS)

DATE APPLICATION SUBMITTED: \_\_\_\_\_ PERMIT NUMBER: 26-FP-

ADDRESS OF PROPERTY: \_\_\_\_\_

PROP. OWNERS NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

PROPERTY OWNER'S ADDRESS: (IF NOT SAME AS ABOVE) \_\_\_\_\_

PROPERTY OWNER'S EMAIL ADDRESS: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_  
\_\_\_\_\_JOB COST \_\_\_\_\_ FLOOD ZONE: YES  NO  CHECK ONE (SEE NOTE BELOW)PLANS ATTACHED: YES  NO  SEE PLANS SUBMITTED \_\_\_\_\_

USE GROUP \_\_\_\_\_ TYPE OF CONSTRUCTION \_\_\_\_\_

STRUCTURE: (MUST CHECK ONE BELOW)

 # of UNITS \_\_\_\_\_ Number of Occupants \_\_\_\_\_  Industrial  Commercial

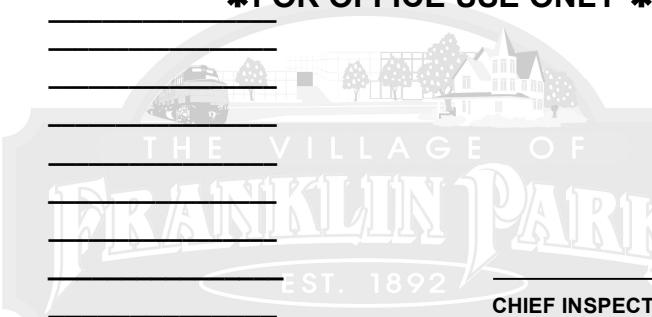
SQ. FT. TOTAL BUILDING: \_\_\_\_\_ SQ. FT. SPECIFIED REMODELING: \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ PHONE NUMBER TO CALL WHEN PERMIT IS READY: \_\_\_\_\_

### PLEASE COMPLETE PAGE TWO OF APPLICATION

**IMPORTANT ! INSPECTIONS ARE REQUIRED FOR ALL WORK BEING DONE, 24HOUR NOTICE  
REQUIRED TO SCHEDULE AN INSPECTION. HAVE PERMIT NUMBER READY**

SPRINKLER: _____ PROCESSING FEE: _____ MECHANICAL: _____ PLUMBING/SEWER: _____ FIRE: _____ THIRD PARTY REVIEW: _____ ENGINEERING FEE: _____ PENALTY FEE: _____ TOTAL PERMIT COST: _____	<b>*FOR OFFICE USE ONLY *</b>  CHIEF INSPECTOR	DATE & TIME CALLED/PICKUP: _____  ZONING STAMP: _____  BUILDING DIRECTOR: _____
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THE VILLAGE OF  
**FRANKLIN PARK**

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**CONTRACTOR INFORMATION**

**INSTRUCTIONS:** ALL CONTRACTORS & SUB-CONTRACTORS MUST BE LICENSED & BONDED WITHIN THE VILLAGE OF FRANKLIN PARK TO PERFORM ANY WORK. (A SEPARATE APPLICATION MUST BE FILLED OUT FOR CONTRACTOR LICENSING) FOR WORK BEING DONE BY CONTRACTOR(S), PLEASE FILL IN THE APPROPRIATE LINE & SUPPLY FOLLOWING INFO (OR SEE BOTTOM OF PAGE FOR PROPERTY OWNER SIGN OFF) PLEASE INCLUDE NAME, ADDRESS AND PHONE NUMBER. ALL DEMOLITION PERMITS REQUIRE \$50,000.00 BOND. IF ADDITIONAL SPACE IS NEEDED ATTACH SEPARATE LIST FOR CONTRACTORS

CARPENTER: \_\_\_\_\_

AWNINGS/DOORS: \_\_\_\_\_

ASPHALT/PAVING: \_\_\_\_\_

CONCRETE/CEMENT: \_\_\_\_\_

DEMO/WRECKER: \_\_\_\_\_

ELECTRICAL: \_\_\_\_\_ **MUST BE OBTAINED ON A SEPARATE APPLICATION**

ROOFER\*: \_\_\_\_\_

EXCAVATOR: \_\_\_\_\_

GLAZIER: \_\_\_\_\_

MASON/TUCK POINTING: \_\_\_\_\_

PLUMBER\*: \_\_\_\_\_

SEWER/DRAIN LAYER: \_\_\_\_\_

SHEET METAL/HVAC: \_\_\_\_\_

SPRINKLER: \_\_\_\_\_

STEEL ERECTOR: \_\_\_\_\_

OTHER: \_\_\_\_\_

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CONTRACTORS SIGNATURE

DATE

