

APPLICATION FOR RESIDENTIAL BUILDING PERMIT / CERTIFICATE OF ZONING COMPLIANCE

Planning & Zoning Department, O'Fallon City Hall
255 South Lincoln Avenue, 2nd Floor
O'Fallon, IL 62269 Phone (618)624-4500 Ext. 4

(Do not write in this space -- For office use only)

Date: _____, 20____ Zoning fee to be paid to City Clerk
() Permit issue No. _____ \$ _____ Date: _____
() Permit denied _____ If denied, cause of denial: _____
() Application appealed No. _____
Variance or Special Permit No. _____

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- 1. Name of property owner(s): _____ Phone: _____
Complete mailing address: _____ E-Mail: _____
2. Applicant ([] Owner [] Contractor): _____ Phone: _____
Complete mailing address: _____
3. General contractor's name/Agent/Responsible party: _____ E-Mail: _____
Complete mailing address: _____ Phone: _____
4. Property address (9-1-1 approved) of proposed construction: _____
5. Legal description: Parcel # or Tax ID#: _____
Lot # and subdivision name including addition: _____

- 6. Proposed construction or use (please check all that apply):
[] Structural
[] Electrical - Contractor's name and phone: _____
[] Plumbing - Contractor's name, phone, and IL License #: _____
[] New residence - Model name or number _____ If multi-family, # of units _____
Have the building plans been previously approved by the City? [] yes [] no If yes, any alterations? [] yes [] no
[] Addition [] Remodel [] Accessory structure [] Deck

Project description: _____
Cost of improvement: \$ _____ Zone district: _____ Flood zone: _____
Type of structure: [] Ranch [] 2-story [] Split-foyer [] Basement [] Crawl space [] Slab
Sq. ft. area of living space: 1st floor _____ 2nd floor _____ Total of both: _____
Basement area sq. ft.: Finished _____ Unfinished _____ Total basement _____
Garage area: _____ sq. ft. Deck area: _____ sq. ft. Covered porch area: _____ sq. ft.
Accessory structures area and descriptions: _____ sq. ft. _____
Total lot area: _____ sq. ft. Total lot covered by all buildings after construction: _____ sq. ft.
Percent of lot coverage (total lot area covered by all buildings divided by total lot area): _____

7. A site plan accompanying your application is required. Please provide the site plan drawing on a separate page if the space below is insufficient (graph paper is available upon request.) Drawn to approximate scale, please include the following:
- a) Dimensions of the zoning lot;
 - b) Dimensions and use of all buildings (show overall dimensions of house including garage if applicable);
 - c) Distance of each building from all zoning lot lines;
 - d) Distance between principal buildings and accessory structures;
 - e) Distance of principal building from principal buildings on adjacent lot(s);
 - f) Location of driveways and off-street parking spaces (show distance from lot lines and overall dimensions);
 - g) Location of all easements (drainage and utility);
 - h) Any additional information as may be reasonably required by the Planning & Zoning Department and applicable requirements of Section 2.04(e).

PLEASE NOTE: Sidewalk cross slope 1/4" per foot maximum. Adjust driveway slopes and building elevations accordingly. Also, all residential driveways must be a minimum of 3 ft. from adjoining property line.

8. Application is hereby made for a Temporary Certificate of Zoning Compliance, as required under the Zoning Ordinance of the City of O'Fallon, Illinois, for the erection, moving or alteration, and use of buildings and premises. In making this application the applicant represents all of the above statements and any attached maps and drawings to be a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit applied for, if granted, is issued on the representations made herein and that any permit issued may be revoked without notice on any breach of representation or conditions. It is understood that any permit issued on this application will not grant right of privilege to erect any structure or to use any premises described for any purpose or in any manner prohibited by the Zoning Ordinances, or by other ordinances, codes or regulations of O'Fallon, Illinois.

(Applicant) _____

(This space is for additional information you wish to provide on this project.)

TEMPORARY CERTIFICATE OF ZONING COMPLIANCE

The plans and specifications submitted with this Application are in conformity with the zone district requirements applicable to the subject property. Changes in plans or specifications shall not be made without written approval of the appropriate city officials. Failure to comply with the above shall constitute a violation of the provisions of the City of O'Fallon Zoning Ordinance.

Dated: _____, 20____

Planning & Zoning Official, City of O'Fallon, Illinois

For office use only: Flood Plain Overlay Restrictions Historic Landmark