

**CITY OF MARION ILLINOIS  
APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT**

Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Electrician: \_\_\_\_\_ Plumber: \_\_\_\_\_ Date: \_\_\_\_\_

**IMPORTANT – Applicant to complete all items in sections: I, II, III and IV**

<b>I. Location Of Building</b>	At (Location) _____ Zoning District _____
	Between _____ and _____ <small>(Cross Street) (Cross Street)</small>
	Subdivision _____ Lot _____ Block _____ Lot Size _____

**II. Type and Cost of Building – All applicants complete parts A–D**

<p><b>A. TYPE OF IMPROVEMENT</b></p> <p><input type="checkbox"/> New Building</p> <p><input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 13)</p> <p><input type="checkbox"/> Alteration (See 2 above)</p> <p><input type="checkbox"/> Repair, replacement</p> <p><input type="checkbox"/> Wrecking (If multifamily residential, enter number of unit in building in Part D, 13)</p> <p><input type="checkbox"/> Moving (relocation)</p> <p><input type="checkbox"/> Foundation only</p>	<p><b>D. PROPOSED USE – For “Wrecking” most recent use</b></p> <table border="0"> <tr> <td>Residential</td> <td>Nonresidential</td> </tr> <tr> <td><input type="checkbox"/> One family</td> <td><input type="checkbox"/> Amusement, recreational</td> </tr> <tr> <td><input type="checkbox"/> Two or more family – Enter Number of units _____</td> <td><input type="checkbox"/> Church, other religious</td> </tr> <tr> <td><input type="checkbox"/> Transient hotel, motel, or dormitory – Enter number of units _____</td> <td><input type="checkbox"/> Industrial</td> </tr> <tr> <td><input type="checkbox"/> Garage</td> <td><input type="checkbox"/> Parking garage</td> </tr> <tr> <td><input type="checkbox"/> Carport</td> <td><input type="checkbox"/> Service station, repair garage</td> </tr> <tr> <td><input type="checkbox"/> Other – Specify _____</td> <td><input type="checkbox"/> Hospital, institutional</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> Office, bank, professional</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> Public utility</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> School, library, educational</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> Stores, mercantile</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> Tanks, towers</td> </tr> <tr> <td>_____</td> <td><input type="checkbox"/> Other Specify _____</td> </tr> </table>		Residential	Nonresidential	<input type="checkbox"/> One family	<input type="checkbox"/> Amusement, recreational	<input type="checkbox"/> Two or more family – Enter Number of units _____	<input type="checkbox"/> Church, other religious	<input type="checkbox"/> Transient hotel, motel, or dormitory – Enter number of units _____	<input type="checkbox"/> Industrial	<input type="checkbox"/> Garage	<input type="checkbox"/> Parking garage	<input type="checkbox"/> Carport	<input type="checkbox"/> Service station, repair garage	<input type="checkbox"/> Other – Specify _____	<input type="checkbox"/> Hospital, institutional	_____	<input type="checkbox"/> Office, bank, professional	_____	<input type="checkbox"/> Public utility	_____	<input type="checkbox"/> School, library, educational	_____	<input type="checkbox"/> Stores, mercantile	_____	<input type="checkbox"/> Tanks, towers	_____	<input type="checkbox"/> Other Specify _____
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<p><b>B. OWNERSHIP</b></p> <p><input type="checkbox"/> Private (Individual, corporation, Non-profit institution, etc.)</p> <p><input type="checkbox"/> Public (Federal, State, or local government)</p>																												

<p><b>C. COST</b></p> <p>10. Cost of improvement ..... \$ _____ be installed but not included In the above cost</p> <p>a. Electrical..... _____</p> <p>b. Plumbing..... _____</p> <p>c. Heating, air conditioning..... _____</p> <p>d. Other (elevator, etc.)..... _____</p> <p>11. TOTAL COST OF IMPROVEMENT..... \$ _____</p>	<p>(Omit cents)</p> <p>Non-residential – Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department state, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</p> <p>_____</p> <p>_____</p>
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**III. SELECTED CHARACTERISTICS OF BUILDING – For new buildings and additions, complete Parts E-L; for wrecking, complete only Part J, for all others skip to IV**

<p><b>E. PRINCIPAL TYPE OF FRAME</b></p> <p><input type="checkbox"/> Masonry (wall bearing)</p> <p><input type="checkbox"/> Wood frame</p> <p><input type="checkbox"/> Structural Steel</p> <p><input type="checkbox"/> Reinforced concrete</p> <p><input type="checkbox"/> Other – Specify _____</p>	<p><b>G. TYPE OF SEWAGE DISPOSAL</b></p> <p><input type="checkbox"/> Public or private company</p> <p><input type="checkbox"/> Private (septic tank, etc.)</p>	<p><b>J. DIMENSIONS</b></p> <p>48. Number of stories..... _____</p> <p>49. Total sq. ft. of floor area, all floors, based on exterior dimensions..... _____</p> <p>50. Total land area, sq. ft. .... _____</p>	
	<p><b>H. TYPE OF WATER SUPPLY</b></p> <p><input type="checkbox"/> Public or private company</p> <p><input type="checkbox"/> Private (well, cistern)</p>		
<p><b>F. PRINCIPAL TYPE OF HEATING FUEL</b></p> <p><input type="checkbox"/> Gas</p> <p><input type="checkbox"/> Oil</p> <p><input type="checkbox"/> Electricity</p> <p><input type="checkbox"/> Coal</p> <p><input type="checkbox"/> Other – Specify _____</p>	<p><b>I. TYPE OF MECHANICAL</b></p> <p>Central air conditioning?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><b>K. NUMBER OF OFF-STREET PARKING SPACES</b></p> <p>51. Enclosed..... _____</p> <p>52. Outdoors..... _____</p>	
		<p><b>L. RESIDENTIAL BUILDINGS ONLY</b></p> <p>53. Number of bedrooms..... _____</p> <p>54. Number of bathrooms:</p> <p>    Full..... _____</p> <p>    Partial..... _____</p>	

PERMIT NO.

STREET ADDRESS

IV. IDENTIFICATION – To be completed by all applicants			
Name		Mailing Address – Number, Street, City, State, Zip Code	Phone Number
1. Owner or Lessee			
2. Contractor			
Builder's License No.			
3. Architect or Engineer			
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction.			
Signature of applicant:		Address:	Application Date:

**BUILDING PERMIT ACKNOWLEDGEMENT**

**THE UNDERSIGNED acknowledges that the basic purpose of the issuance of a building permit by the City of Marion is to allow the Building Inspector to check the applicable Zoning Regulations for the property where the building is to be constructed, renovated and/or repaired.**

**THE UNDERSIGNED further acknowledges that the issuance of a building permit by the City of Marion is not an indication, assurance, evidence or guarantee by the City of Marion that the building, location, building plans or any part thereof complies with any or all applicable State or Federal statutes, codes, rules or regulations.**

**THE UNDERSIGNED further acknowledges that it is the sole responsibility of the owner and/or builder of the building to be constructed, renovated or repaired to comply with all applicable local, State and Federal statutes, codes, rules and regulations, and that the City of Marion assumes no responsibility for such compliance.**

\_\_\_\_\_

**APPLICANT**

<p><b>Validation</b></p> <p>Building Permit Number: _____</p> <p>Building Permit Fee Including \$10 Zoning Fee: \$ _____ Date Received: _____</p> <p align="center"> <input type="checkbox"/>Credit Card      <input type="checkbox"/>Cash      <input type="checkbox"/>Check# _____ </p> <p>Approved by: _____ Date: _____</p>
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