



COMMERCIAL BUILDING REPAIR & REMODEL PERMIT APPLICATION

Please PRINT using ONLY BLUE or BLACK INK

www.troyil.us

OFFICE WILL ASSIGN: Permit #: _____ Date: _____

PART 1 – JOBSITE / PROPERTY INFO:

COMPLETE PAGES 1 – 3 BEFORE SUBMITTAL

Address _____
 Development Name _____
 Current Zoning _____ Lot Number _____
 Parcel ID # _____

INSPECTION PROCESS

Email: buildingzoning@troyil.us

INCLUDE: ADDRESS, TYPE of inspection & APPROXIMATE TIME desired.

PART 2 – OWNER / APPLICANT INFO:

Name _____ Email _____
 Business Name _____ Home/Business Phone _____
 Address _____ Cell Phone _____

***** APPLICATION TO BE COMPLETED BY ARCHITECT OR DESIGN PROFESSIONAL *****

PART 3 – CONTRACTOR INFORMATION:

Contracting Services	Name	Phone/Cell No.	License # and Email
Architect/ Design Professional			Lic. # Email
General Contracting			Email
Concrete Flatwork			Email
Concrete Foundation			Email
Drywall/Plaster			Email
Electrical			Email
Excavation			Email
Fire Suppression			Email
Framing			Email
Hood Exhaust and Extinguish System			Email
HVAC			Email
Insulation			Email
Plumbing			Lic. # Email
Roofing			Lic. # Email

PART 4 – CONSTRUCTION INFORMATION:

EXISTING USE and/or PROPOSED USE

Assembly

- A-1 e.g. Theaters
- A-2 e.g. Restaurants, Bars
- A-3 e.g. Halls
- A-4 e.g. Arenas
- A-5 e.g. Stadiums

Business

- B e.g. Professional Services

Educational

- E

Factory & Industrial

- F-1 e.g. Bakeries, Laundries
- F-2 e.g. Metal Products

Hazard

- H-1 e.g. Explosives
- H-2 e.g. Flammable Gases
- H-3 e.g. Consumer Fireworks
- H-4 e.g. Toxic Materials
- H-5

Institutional

- I-1 e.g. Group Homes
- I-2 e.g. Hospitals
- I-3 e.g. Correctional Centers
- I-4 e.g. Child Daycare

Mercantile

- M e.g. Retail Stores

Residential

- R-1 e.g. Hotels
- R-2 e.g. Apartments
- R-3 e.g. Dormitories
- R-4 e.g. Assisted Living

Storage

- S-1 e.g. Moderate Hazard Storage
- S-2 e.g. Low Hazard Storage

Utility & Miscellaneous

- U e.g. Carport, Tanks

Improvement Type: Remodel Repair/Replace

Plumbing:	Public Sewer:	Sump Pump:	Ejector Pump:	Grease Trap:
	<input type="checkbox"/> Yes <input type="checkbox"/> No			

PART 5 – PERMIT REQUIREMENTS

PLAN REVIEW TIMES VARY.
ALL PLANS WILL BE REVIEWED BEFORE A PERMIT
WILL BE APPROVED & ISSUED.

MINIMUM CODE REQUIREMENTS

- Compliance with the latest adopted edition of the *National Electrical Code Standard NFPA #70*.
- Compliance with the latest adopted edition of *The International Building Code*.
- State of Illinois law requires compliance with the latest adopted edition of the *Illinois Plumbing Code*.
- State of Illinois law requires compliance with the latest adopted edition of the *International Energy Code*.

The following items MAY be required before a building permit can be issued:

One set of building plans, signed and sealed by an Illinois licensed architect or design professional that include:

- Digital copy of all drawings for review
- Floor plan details and notes
- Mechanical plan, details and notes
- Ceiling plan
- Structural drawings, details and notes, wall sections
- Electric/lighting plan, details and notes
- Plumbing plan (Reviewed and approved by the Dept. of Public Health)
- Estimated cost of Construction: _____
- Life Safety Plan

CONTACT TROY FIRE DEPARTMENT and SUBMIT PLANS AS REQUIRED

*** BUILDING PERMIT FEES ARE NON-REFUNDABLE ***

PART 6 – ACKNOWLEDGEMENT & CERTIFICATION OF OWNER

In making this application, I represent all submitted statements and any attached drawings to be a true description of the proposed new or altered uses and/or buildings. I understand that any permit issued is subject to an immediate stop work order, revocation without notice, and/or citation if my sub-contractors or I breach representations, conditions, codes, policies, or inspection requirements.

I understand and agree that I am responsible for full compliance with all of the codes, policies, and inspection requirements, and to provide this information to all subcontractors and material suppliers to make sure they are aware of these codes, policies, and inspection requirements. I agree that it is also my responsibility to comply with any subdivision covenants and restrictions that may also apply to this proposed construction.

I agree to notify the Building and Zoning for inspections as improvements progress and not to allow a person to use or occupy the structure before a final inspection has been made and approved.

I hereby certify that I am the owner of record of the named property, or 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. I agree to conform to all applicable laws of this jurisdiction and any applicable State of Illinois codes and regulations that may be more stringent. In addition, if a permit for work described in this application is issued, I certify that the Code Official or the Code Official's authorized representatives shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. Furthermore, approval of this building permit application and issuance of a building permit does not give permission to violate the City of Troy's building and zoning codes.

SIGNATURES:

Applicant/Property Owner/Owner's Representative /Contractor

Date

Contact Person in Charge of Work (Title)

Email

Phone

Cell Phone

OFFICE USE ONLY:

Cost of Construction per ICC Valuation Date: _____

Building Permit Fee: _____

Comments: _____

Approved: _____ (Pages 5 - 8: retained by owner)

Code Official

Date

CERTIFICATION OF AWARENESS OF THE ILLINOIS ENERGY CONSERVATION CODE

Note: This form must be filled out completely, **signed before a Notary Public**, and submitted to the Building & Zoning Department for approval before permit will be issued.

Construction site address: _____

I certify that I am aware of the building requirements of the Illinois Energy Conservation Code and will have on record for the above address required documentation and testing reports in the following areas: Insulation ratings, glass and door U-factor ratings, heating and cooling equipment efficiency, building air leakage testing, duct tightness testing, and REScheck/REMrate/COMcheck results.

Sign in person before a Notary Public:

Signature of Contractor

Date

Name of Company (if applicable)

Mailing Address of Individual/Company

Phone Number

* * * * *

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

Notary Seal

* * * * *