Village of Onarga
Building Permit Application

113 W. Seminary Ave. • P.O. Box 100 • Onarga, IL 60955
Phone: (815) 268-7311 • Fax: (815) 268-4323 • Email: villageofonarga@sbcglobal.net

Application Under Zoning Ordinance for: _____ Standard Use Permit or _____ Special Use

Owner: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ St: _____ Zip: _____

General Contractor: _____ Phone: (_____) _____ - _____

Address: _____ City: _____ St: _____ Zip: _____

Location of Project: _____

Legal Description: _____

Signature of Applicant: _____

Tax Parcel Number / PIN: _____
(Refer to Country Tax Bill Notice)

Date: ____/____/_____

• Residential
- _____ One Family
- _____ Two Family
- _____ Multi Family
- _____ Garage
- _____ Other

• Non-Residential
- _____ Store Retail
- _____ Office
- _____ Industrial
- _____ Institutional
- _____ Other

• Type of Improvement
- _____ New Building
- _____ Addition
- _____ Alteration
- _____ Conversion
- _____ Other

• Labor & Material Costs: _____

Attached Info	Yes	No
Plan Exhibit		
Site Plan		
Details		
Other		

Lot Size	Required	Actual
Min. Ave. Width		
Yard Size		
Front		
Side		
Rear		
Bldg Hght Ave.		
% Open Space		
Trees		
Padding		
Floor Area		
No. Bedrooms		
Est. Cost		

_____ Zoning District
- _____ R-1 Single Family
- _____ R-2 Single Family
- _____ R-3 Duplex
- _____ R-4 Multi Family
- _____ RMH Mobile Home
- _____ B-1 Neighborhood Business
- _____ B-1 Central Business
- _____ M-1 Manufacturing
- _____ M-2 Manufacturing

• Type of Construction
- _____ Masonry
- _____ Wood Frame
- _____ Steel
- _____ Concrete

• Provide Full Description & Exhibits As Required:

_____

_____

_____

For Use by Village of Onarga

	Date:	By:
• Plan Review:	____/____/_____	_____
• Permit Issued:	____/____/_____	_____
• Cert. of Compliance:	____/____/_____	_____
• Bond Release:	____/____/_____	_____

• Bond Amount: _____ • Permit Number: _____ • Permit Fee: _____

• Filing Date: ____/____/_____ ALL PERMITS & EXHIBITS MUST BE PROVIDED • Received: _____

• Office Notes