



City of Galva
 311 N. W. 4th Avenue
 Galva, IL 61434
 Phone: (309) 932-2555
 Fax: (309) 932-3306
 www.galvail.gov

Building Permit Application

Page 1 of 2

Date:

Permit Number:

Plan Check #:

Project Address:

Zone:

Property Owner Tenant

Architect Designer Engineer

Name:

Address:

City/State/Zip:

Phone:

Fax:

E-Mail Address:

License Number:

Name:

Company:

Address:

City/State/Zip:

Phone:

Fax:

E-Mail Address:

The City of Galva may require written approval from the owner

Project Contact:

Address:

City/State/Zip:

Phone:

Fax:

E-Mail Address:

Contractor Owner - Builder

License Number:

Company Name:

Address:

City/State/Zip:

License Type:

Phone:

Fax:

E-Mail Address:

Purpose of Application

NONRESIDENTIAL

RESIDENTIAL

New Construction

Addition to Existing

Alteration/Repair

Demolition

Relocate

Proposed Use of Building:

Current Use of Building:

Description of Proposed Work
 (Example: I am adding a 14' X 16' office space to an existing structure).

Attach drawing or plans detailing the proposed work

Cost of Improvement (labor + materials + overhead + profit) Rounded to Nearest Dollar:

To be installed, but not included in the above cost:

Electrical

Plumbing

HVAC

Other (elevator, etc.)

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 I/we agree to conform to all applicable laws of this jurisdiction and those of the State of Illinois and the Federal Government.

Signature of Applicant:

Date:

For Demolitions Only

- Superintendent of Streets Notified? Arrangements made for removal of water meter prior to demolition?
- Water service excavated to fitting at the main and turned off under the inspection of the Water Superintendent?
- "B" box removed and returned to the City?
- Sanitary sewer service excavated, capped and cemented as required under the inspection of the Water Superintendent?

For demolitions, all of the above must be completed to the satisfaction of the City BEFORE demolition begins. Applicant or contractor(s) must acquire all necessary EPA and IEPA permits that are required, if any. Demolitions must be completed within thirty days of permit issuance.

Office Use Only

Plan Check Required? Yes No

Route To:

<input type="checkbox"/> Residential Plan Checker	<input type="checkbox"/> Commercial Plan Checker	<input type="checkbox"/> Streets
<input type="checkbox"/> Planning	<input type="checkbox"/> Engineering/Grading	<input type="checkbox"/> Zoning
<input type="checkbox"/> Fire	<input type="checkbox"/> Water/Sewer Dept.	<input type="checkbox"/> Other _____

Hazardous Materials? Yes No Variance Required? Yes No

Planning Approval? Yes No Zone Change Required? Yes No

Soils Report Required? Yes No Tapping Fees Required? Yes No

Grading Plans Required? Yes No

Building Permit Number (from page 1)

Date Permit Issued:

Calculated Building Permit Fee:

Approved by:

Notes: