



CITY OF
STERLING
ILLINOIS

BUILDING & ZONING
Industrious. Inspired. Innovative.

BUILDING PERMIT APPLICATION
212 3rd Avenue, Sterling, IL 61081
815-632-6624
Office hours: Mon-Fri 8am-4:30pm

I. Project Information

Project Address/Pin: _____
 Owner Name: _____ Owner Phone: _____
 Owner Address: _____ City: _____ State _____

II. Construction Information

Mark all that apply: <input type="checkbox"/> New Construction <input type="checkbox"/> Demolition <input type="checkbox"/> Addition/Remodel <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Roofing <input type="checkbox"/> Siding <input type="checkbox"/> Other	Proposed Use: <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family # of units <input type="checkbox"/> Stores/Retail <input type="checkbox"/> Service Station/Repair <input type="checkbox"/> Industrial/Manufacturing <input type="checkbox"/> Office/Bank/Professional
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Detailed description of work/material proposed:

Project Total Cost _____

III. Contractor/Design Professionals-if applicable--List ALL subcontractors-attach separate sheet if needed **Contractors are required to be registered/current with the City of Sterling**

A. General Contractor	Phone#
B. Electrical Contractor	Phone# Lic#
C. Mechanical Contractor	Phone#
D. Plumbing Contractor	Phone#
E. Roofing Contractor	Phone# Lic#

IV. APPLICANT INFORMATION

I hereby certify that I have the authority to make the forgoing application, that the information given is correct and true. I acknowledge I am knowledgeable of the code requirements for the work to be performed and shall perform the work described in accordance with all applicable Codes. I also acknowledge that as the permit holder, I assume all responsibility and liability for the work performed, and it is my responsibility to contact the Building Department for applicable inspections when work is complete.

Signature: _____ Date: _____