

Building and Code Enforcement Department

303 W. Wesley Street P.O. Box 727 Wheaton, IL 60187-0727 630-260-2050; fax 630-260-2195

City of Wheaton, Illinois

www.wheaton.il.us

APPLICATION FOR PERMIT

Project Address			Phone	
Owner of Property		Fax		
Address of Property Owner (if different than above)		E-Mail		
Intended Use	Single Family	Garage	Roof	Subdivision
(Check One)	Multi-Family	Shed	Pool	No. of Bedrooms
	Commercial	Deck/Patio	Electric	No. of Baths
Scope of Work:	New Construction	Addition	Remodel/Repai	r 🗌 Demolition

Description of Work:

Name	Address	Phone	Cost of Work	Permit Fee
Architect:				
General :				
Electrician:				
Mechanical:				
Plumbing:				
Sprinkler:				
Fire Alarm:				
Elevator:				
Roofing/Other:				
		TOTAL		

UNDER PENALTIES OF INTENTIONAL Print Name					
MISREPRESENTATION AND/OR PERJURY, I Owner or Representative					
declare that I have examined and/or made this					
application and it is true and correct to the best of my Signature					
knowledge and belief. I agree to construct said					
improvement in compliance with all provisions of the Address					
Building and Zoning Ordinances of the City of					
Wheaton and all amendments thereto. I realize that Phone Date					
the information that I have affirmed hereon forms a					
basis for the issuance of a building permit.					
DO NOT OCCUPY BUILDING UNTIL FINAL INSPECTION HAS BEEN PERFORMED AND A CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED.					

Ap	proved	by:
----	--------	-----