

DEVELOPMENT SERVICES DEPARTMENT 14700 RAVINIA AVENUE ORLAND PARK, ILLINOIS 60462 708-403-5300

www.orlandpark.org

PERMIT#

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EXPRESS PERMIT APPLICATION								
		Job Address:					Date:	
Location of We	ork	□Single Family □Condo □Townhome			Γownhome	☐Multi-Family	nily □Commercial	
and Homeown	_	Homeowner Name:						
Information:		Homeowner Address:						
		Phone:			Email:			
Description of Work:								
Cost of Work:		\$						Affidavit required)
0		Business Name:					CL#	
		Business Address:					Bond Expires:	
Contractor #1 Information:		Contact Person:					State Lic Exp:	
		Phone: Email:						
		Type/Classification of Contractor:						
Contractor #2 Information:		Business Name:				CL#		
		Business Address:					Bond Expires:	
		Contact Person:					State Lic Exp:	
		Phone:						
		Type/Classification of Contractor:						
Applicant:		Printed Name:						
		Phone:					□ Personal□ Business	
		Email:					□ Personal□ Business	
I, the Owner/Agent/Contractor for the above property hereby applies to the Development Services Department of the Village of Orland Park, IL for a permit to erect, alter, construct, or enlarge the structure or part thereof herein described, and if granted the permit applied for, agrees to comply with all requirements of the village ordinances relating thereto by such ordinances including, but not limited to, paying the fees required and requesting necessary inspections.								
Applicant Signature Date								
Village Use:		uilding Official Printed Name:		Signature:				Date:
village USE.								FEE: