

VILLAGE of ORLAND HILLS

PRINT or TYPE

16033 South 94th Avenue
Orland Hills, Illinois 60487-4623

PRINT or TYPE

Rev. May 2010

DECK PERMIT APPLICATION

Construction Address: _____ { Construction Cost _____ }

Owner's Name: _____ Phone: _____

Applicant: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Lot. Blk. Subd. Twp. P.I.N.# _____

Carpenter Contr: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Concrete Contr: _____ Phone: _____

Address: _____ City: _____ Zip: _____

NOTE All trades & subcontractors must be licensed by the village and bonded by their insurance company.

COMPLETE THE FOLLOWING

- (1.) Deck designed to support dead load of materials? (Yes) (No) [circle one]
(2.) Deck designed to support live load of 40 lb. sq. ft.? (Yes) (No)
(3.) Gravel over plastic membrane under deck? (Yes) (No)
(4.) Deck built over basement window? (Yes) (No)
(5.) Height of floor deck above ground: _____ ft.
(6.) Size of concrete pier footing: _____ X _____
(7.) Stairs with guard and hand rails, and balisters?: (Yes) (No)
(8.) Guard rails around deck with balisters? (Yes) (No)

~ SUBMIT WITH APPLICATION ~

- 1. Two (2) sets of survey / plot plan showing location of all existing structures, i.e. house, accessory buildings, shed, pool, fencing, etc., from lot lines , and also showing proposed deck & where it is from the lot lines and all structures.
2. Two (2) sets of plans showing details of deck construction.

I hereby declare that all statements are true to the best of my knowledge and belief. It is my understanding that no error or omission in either the specifications, plans, survey or application, whether said plans or application has been permitted, shall permit or relieve the applicant, from having all work completed in any other manner than that allowed by the Village of Orland Hills Codes and Ordinances and the statutes of the State of Illinois.

Signature of Applicant: _____ Date: _____

I hereby authorize the applicant and those listed on the contractors list, to perform any / all work necessary to complete the requirements of this permit.

Property Owner's Signature: _____ Date: _____

Date Rec: _____ App By: _____ Date: _____ Permit # 9 -9 -

Fees: _____ Date Paid: _____ Cash/Check: _____ Permit Expires: _____

Phone: 708/349-4887

REQUEST INSPECTIONS

Fax: 349-1358

- 1. Pier Footings: BEFORE pouring concrete
2. Final : After completion per permit plan
** Before Digging Call J.U.L.I.E. 1-800-892-0123 **

