

VILLAGE OF BRIMFIELD

W.F. HARDING MEMORIAL BUILDING
P.O. BOX 451
BRIMFIELD, ILLINOIS 61517

VILLAGE HALL
(309)446-3412

WATER DEPARTMENT
(309)446-3022

The undersigned hereby makes application for Zoning Use Permit in accordance with the provisions of the zoning ordinance of the Village of Brimfield, Illinois.

APPLICANT(S) NAME

APPLICANT(S) ADDRESS

APPLICANT(S) PHONE NUMBER

IF PROPERTY OWNER IS DIFFERENT THAN APPLICANT PLEASE SUPPLY PROPERTY OWNER NAME

PROPERTY OWNER ADDRESS

PROPERTY OWNER PHONE #

CONTRACTOR NAME

CONTRACTOR ADDRESS

CONTRACTOR PHONE NUMBER

LEGAL DESCRIPTION OF PROPERTY

Subdivision Lot Block
Size of Tract # of Buildings)

TYPE OF WORK

NEW CONSTRUCTION Main or Principal Structure Use
Accessory Structure Use

ALTERATION OR CHANGE (Explain)

DETAILS OF PROPOSED CONSTRUCTION

SIZE OF BUILDING front _____ depth _____ stories _____ height _____

YARDS Side _____ Rear _____ Front(s) _____

USE OF PREMISES Owner Occupied _____ Rental _____ For Sale _____

PRESENT ZONING CLASSIFICATION _____

ESTIMATED COST _____

START DATE _____

COMPLETION DATE _____

HEARING NECESSARY: YES NO
FOR VARIANCE SPECIAL USE ADMENDMENT

Please use the space below to draw a layout of all buildings, current and proposed, on the property. Include front, rear and side lot lines and list street name(s) adjacent to the property.

I have carefully read the attached application and completed the diagram and in consideration of the issuance of a Zoning Use Permit, I agree that the construction work will be in accordance with all of the laws of the State of Illinois, and Ordinances of the Village of Brimfield, and I also specifically agree to conform to all provisions of the Zoning Ordinances of the Village of Brimfield and that the said described premises and its existing and proposed building and uses shall be used only for such purposes as are set forth above or other uses permitted in The District in which the premises are located.

_____ OWNER

_____ AGENT

ADDRESS: _____

OFFICE USE ONLY

PERMIT ISSUED (YES) (NO) NUMBER _____ DATE _____

POSTING CARD ISSUED (YES) (NO) DATE _____

DATE OF FIELD CHECK _____

REMARKS: _____

FINAL INSPECTION

CONSTRUCTION COMPLETED: (YES) (NO)

If APPLICABLE: PREMISE OCCUPANCY READY (YES) (NO)

REMARKS _____

BY _____

DATE _____

ZONING OFFICER

Revision: April 9, 2012