

VILLAGE OF ORLAND HILLS

PRINT or TYPE  
SPRINKLER / IRRIGATION SYSTEM

16033 South 94<sup>th</sup> Avenue  
Orland Hills, IL 60487

PRINT or TYPE  
SPRINKLER / IRRIGATION

BUILDING PERMIT APPLICATION

Construction Address: \_\_\_\_\_ Construction Cost \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Lot. \_\_\_\_\_ Blk \_\_\_\_\_ Subd. \_\_\_\_\_ Twp. \_\_\_\_\_ P.I.N. # \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

~ SUBMIT WITH APPLICATION ~

1. Two (2) sets of survey/plot plan showing location of all structures, i.e. house, garage, accessory buildings, decks pool, fencing, etc., from all lot lines.
2. Two (2) sets of plans and specifications showing details of all sprinkler installation, including, rotor, spray, controller and backflow preventer.
3. **NOTE: ALL CONTRACTORS, SUBCONTRACTORS AND TRADES MUST BE LICENSED BY THE VILLAGE AND PROOF OF BONDING FROM THEIR INSURANCE COMPANY MUST BE IN EFFECT WITH A COPY FORWARDED TO THE VILLAGE FOR FILING.**
4. A \$100.00 refundable deposit is required for permits involving RPZ's.

*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 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 # \_\_\_\_\_

Fees: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Cash/Check # \_\_\_\_\_ Permit Exp Date \_\_\_\_\_

PHONE:  
708/349-4887

**REQUEST INSPECTIONS  
AS INDICATED ON INSPECTION LIST**

FAX:  
708/349-1358