



Village of Willow Springs

BUILDING AND ZONING DEPARTMENT
 1 VILLAGE CIRCLE
 WILLOW SPRINGS, ILLINOIS 60480
 708-467-3700
 FAX 467-3710

vowsbuild@gmail.com
 www.willowsprings-il.gov

PERMIT# _____

Real Estate Tax ID (PIN) _____

PLUMBING PERMIT APPLICATION

About the location where work is being done:	Address:	
	Business or Homeowner Name:	
	Business or Homeowner Phone:	

Describe plumbing work being done:	
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Cost of work:	\$ _____	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Medical	<input type="checkbox"/> Office
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About the contractor who will be doing the work:	Business Name:		CR#
	Business Address:		Lic Exp:
	Contact Name:		055-
	Phone:	Email:	

List the quantities for all fixtures being replaced/installed. Write in fixtures not listed.

	FEE			FEE			FEE	
	Quantity	(Village Use)		Quantity	(Village Use)		Quantity	(Village Use)
WATER HEATER			BATHTUB/SHOWER			DISHWASHER		
DRAIN TILE			LAVATORY			WASHER		
LAWN SPRINKLER (REQUIRES ADDITIONAL PERMIT)			WATER CLOSET			FOUNTAIN		
FLOOR DRAINS			URINAL			SUMP PUMP EJECTOR		
LAUNDRY TRAY MOP SERVICE SINK			SINK					

Plumbing Contractor:	I, the Owner/Agent/Contractor, for the above property hereby apply to the Building Department of the Village of Willow Springs, IL for a permit to erect, alter, construct, or enlarge the structure or part thereof herein described, and if granted the permit applied for, agree 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. I hereby agree to comply with the applicable Plumbing Codes adopted by the Village of Willow Springs.
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****Note**** A Letter of Intent on the contractor's letterhead is required with **all** plumbing permits. Corporations must have the corporate seal affixed. All others must be notarized.
 Date _____

Applicant Printed Name _____ Signature _____

Village Use:	Plumbing Inspector- Print name, sign and date:	FEE \$ _____
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