Fulton County Planning and Zoning 257 W. Lincoln Street Lewistown, Illinois 61542 309-547-0902 309-357-0291 cell

SOLAR PERMIT APPLICATION

Please Print or Type								
	PROJECT ADDRESS (Number and Street)						APPLICATION DATE	
Project	LOT NUMBER BLOCK			CURDIVISION OF TRACT NAME				
Pr	LOT NOMBER	SOBBIV	SUBDIVISION OR TRACT NAME					
	CONTACT NAME		EMAIL			PHONE	FAX	
Applicant						()	()	
	COMPANY NAME		MAILING	MAILING ADDRESS (Street, City, Zip)				
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Owner	NAME OF PROPERTY OWNER		EMAIL			PHONE ()	FAX ()	
	COMPANY NAME (If applicable)		MAILINI	C ADDRESS (Strop	ot City Zin\	,		
	COMI ANT MAINE (II applicable)		IVIAILIIN	MAILING ADDRESS (Street, City, Zip)				
	COMPANY NAME		MAILING	MAILING ADDRESS (Street, City, Zip)				
Contractor								
ontra	CONTRACTOR TYPE		LICENS	E NUMBER		PHONE	FAX	
ŏ						()	()	
	ARCHITECT	MAILING	MAILING ADDRESS (Street, City, Zip)			PHONE ()		
Other							,	
	ENGINEER			MAILING ADDRESS (Street, City, Zip)			PHONE ()	
Description	PROJECT CATEGORY			DETAIL DESCRIPTION (Use reverse if necessary)			PROJECT VALUATION	
	☐ New Construction ☐ Plumbing ☐ Sign						\$	
	☐ New Residential ☐ HVAC ☐ Fence						ELECTRICAL VALUATION	
	☐ Remodel ☐ Electrical ☐ PV Solar ☐ Basement ☐ Roof ☐ Other						\$	
Δ	☐ Basement	Other				SQ. FT.		
							<u> </u>	
ant	The information given on this application is accurate to the best of my knowledge. All provisions of laws and ordinances governing this work will be complied with, whether specified on this application or not. Granting a permit does not give authority to violate or cancel provisions of any other state or local law regulating construction or							
plica	specified on this application or not. Granting a permit does construction performance. The permit must be paid for with Applicant Signature			thin 45 days. The applicant agrees to pay the plan review fee whether perm Date			is purchased or not.	
Αp								
• FOR OFFICE USE ONLY •								
COMMENTS/SPECIAL CONDITIONS						Fee Type	Amount	
						Building Permit Fee	\$	
						BOCO Use Tax	\$	
						City Use Tax	\$	
						Electrical Inspection	\$	
						Water Tap Sewer Tap	\$	
						Drainage	\$ \$	
						Service Expansion	\$ \$	
DATE R	ECEIVED	GM CLASS	STAFF APPROVA	L		Parks and Tree Fee	\$ \$	
<i>2.</i> 10	· · · - ·	☐ Exempt		INITIAL	DATE	Public Arts Fee	\$	
□ N2 □ Public			Planning			Engineering Inspection	\$	
			☐ Public Works ☐ Fire Departmer			Electrical Temporary	\$	
□ N3 □ Fire D						Plan Check	\$	
			□LURA			Other	\$	
						TOTAL FEES	\$	