



# VILLAGE of WESTCHESTER

10300 ROOSEVELT RD. 60154  
Phone (708) 345-0199 Fax (708) 345-0884

## Application for Plumbing Permit

(please print)

Name of Resident: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
street city state zip

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_  
street city state zip

State of Illinois License Number: \_\_\_\_\_

Description of Work: \_\_\_\_\_

Cost of Work: \_\_\_\_\_

By signing this application, the applicant agrees he / she will not violate any law of the United States or the State of Illinois, or any ordinance of the Village of Westchester which may be in force and effect during all or any part of the period covered by the issuance of the permit pursuant to this application.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Number of fixtures \_\_\_\_\_ @ 15 ea. = \_\_\_\_\_  
Water Tap Fee \_\_\_\_\_  
Sewer Tap Fee \_\_\_\_\_  
Plan Review Fee \_\_\_\_\_

Inspection Fee \_\_\_\_\_  
Permit Fee \_\_\_\_\_  
Guarantee Deposit \_\_\_\_\_  
TOTAL \_\_\_\_\_

Fee Paid: \_\_\_\_\_ Code: \_\_\_\_\_ Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_