

# Village of Morton Zoning & Code Enforcement Department

120 N. Main St., Morton, IL 61550

Phone: (309)266-5361 Fax: (309)266-5508 Email: bmarks@morton-il.gov

## **SUBMITTAL REQUIREMENTS & INFORMATION FOR A DETACHED GARAGE BUILDING PERMIT**

- A completed Detached Garage Building Permit Form.
- A site plan of the lot showing; the proposed structure with dimensions of the structure, all setback dimensions to front, rear, and side property lines and other structures. Include any driveway improvements.
- A grading plan with all structure elevations along with current and proposed grades illustrating drainage flow may be required.
- If applicable, an electrical permit is required in conjunction with the Detached Garage Building Permit. The electrical permit fee is \$200.00.
- All work is to be done in compliance with the 2015 International Residential Code.
- A full set of scaled construction plans that include the following:
  - A Foundation Plan
  - Detailed Wall Sections – Include all construction components
  - A Truss Plan or Roof Framing Plan
  - Exterior Elevation Views of all Four Sides

### **SITE & PROJECT INFORMATION**

**NOTE:** Meeting the correct setbacks from the property line is the responsibility of the owner/applicant

Site Address or Parcel Number \_\_\_\_\_

Setback from Front Property Line \_\_\_\_\_

Setback from Rear Property Line \_\_\_\_\_

Setback from Side Property Lines \_\_\_\_\_ & \_\_\_\_\_

Height – Ground to Peak \_\_\_\_\_ Structure Width \_\_\_\_\_ Structure Depth \_\_\_\_\_

Total Square Footage of Garage \_\_\_\_\_ Project Cost: \$ \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

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

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<b>GENERAL CONTRACTOR:</b> _____ IF OWNER MARK "SELF"	Email: _____
Address: _____	Phone: _____

<b>ELECTRICAL CONTRACTOR:</b> _____ IF APPLICABLE	Email: _____
Address: _____	Phone: _____

<b>EXCAVATOR:</b> _____ IF APPLICABLE	Email: _____
Address: _____	Phone: _____

<b>CONCRETE CONTRACTOR:</b> _____ IF APPLICABLE	Email: _____
Address: _____	Phone: _____

<b>ROOFING CONTRACTOR:</b> _____ IF APPLICABLE	Email: _____
Address: _____	Phone: _____
License Number: _____	

It is hereby certified that the above use as shown on the plats and plans submitted with the application conforms with all applicable provisions of the Village of Morton Zoning Ordinance. The issuance of this Permit does not allow the violation of Village of Morton Zoning Ordinances or other governing Regulations.

Any changes or alteration in the accompanying submittal subsequent to the issuance of this permit without approval from the Zoning and Code Enforcement Officer shall constitute sufficient grounds for revocation of such permit.

Applicant understands and agrees with the terms of the permit.

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Signed by the:

Contractor

Agent

Owner

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