YOU NEED TO KNOW YOUR PROPERTY LINES. IF YOU DO NOT KNOW YOUR PROPERTY LINES, YOU WILL HAVE TO GET YOUR LOT SURVEYED AT YOUR OWN COST.

LEGAL DESCRIPTION OF PROPERTY MUST BE FILLED OUT ON APPLICATION OR IT WILL NOT BE APPROVED.

**\*\*\*BEFORE DIGGING CALL IN A JULIE (811)\*\*\***

Form #1

**City of Chester**

APPLICATION FOR

CERTIFICATE OF ZONING COMPLIANCE

(BUILDING AND ZONING PERMIT APPLICATION)

(For office use only)

**OFFICE OF THE ZONING**

**ADMINISTRATOR**

**Chester, Illinois**

**618-826-5114**

**618-826-5216 fax**

Permit Application No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Perm. Parcel No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Zone District Classification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee Paid: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permit Fee: $30.00 minimum fee valued up to $30,000.00

Plus $1.00 per $1,000.00 value of project exceeding $30,000.00

Initial Certificate of ( ) yes

Compliance Issued ( ) no

**Lorin Mott**

Zoning Administrator

**618-826-2326 Ext. 227**

**INSTRUCTIONS TO APPLICANTS:** (**NOTE:** **After filling out application call the Zoning Administrator to make an appointment. After Zoning Administrator has approved and signed application bring application to the Mayor’s Office to acquire the Building Permit.)***Before beginning any construction a Certificate* of *Zoning Compliance and a Building Permit must be obtained from the Zoning/Building Administrator. Application for permits must be made by the owner of the property on which the construction is to take place* or *his duly-authorized agent. A legal description of the property and a site plan of the proposed construction must be included with this application. The attached sheet, which may be used for drawing the site plan, lists information which must be shown.*

If the proposed construction meets the zoning requirements, a permit will be issued. If the Zoning Administrator determines that it does not comply with requirements of the zoning ordinance, the applicant may request an interpre­tation of the regulations by the Zoning Board of Appeals (if you disagree with the Zoning Administrator) or you may request a variance or zoning amendment depending on the circumstances.

*All information requested below must be provided before any permits will be issued. To prevent delay and to expedite your application, provide all re­quested information. Applicants are encouraged to visit the Mayor’s Office or contact the Zoning Administrator at 618-826-2326 for any assistance needed in completing this form.*

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

1. NAME OF APPLICANT(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

(street) (city) (zip)

1. PROPERTY INTEREST OF APPLICANT:

( ) Owner ( ) Contract Purchaser ( ) Lessee ( ) Other: \_\_\_\_\_\_\_\_\_\_\_

1. NAME OF OWNER:

(if other than applicant): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

(street) (city) (zip)

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1. LOCTION OF PROPOSED CONSTRUCTION
   1. Address of proposed construction \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. Legal description of property \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Description by metes and bounds or lot number, block number,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

and name of subdivision. Attach additional sheets if necessary. This must be filled out.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. Construction located in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zoning District.
  2. Construction located ( ) within corporate limits of Chester

( ) within 1 mile of corporate limits of Chester

5. PROPOSED CONSTRUCTION

( ) New building

( ) Addition or alteration (explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) Mobile home on permanent foundation

­( ) Relocation of existing building

( ) Other (explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­

6. EXISTING USE OF PROPERTY

( ) Vacant Lot Residential:

( ) Business (type) \_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Single Family

( ) Industrial (type) \_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) 2 or 3 Family

( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Multi-Family

(No. of units: \_\_\_\_\_\_)

2

7. PROPOSED USE OF PROPERTY

( ) Business Residential: Accessory:

(type) \_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Single Family ( ) Garage

( ) Industrial ( ) 2 or 3 Family ( ) Carport

(type) \_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Multi-Family ( ) Storage Shed

­( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_ (No. of units: \_\_\_\_\_) ( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_

1. PLANS AND SPECIFICATIONS
   1. Plans: A site plan is attached and shows information as required on page 5 of this application.
   2. Specifications: Give the following information, if applicable, for each structure or use identified on the attached site plan.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  | Number of |  |  | No. of |
| Type of | Height |  |  | Dwelling | No. of | Parking |
| Structure | In Feet | Stories | Rooms | Units | Employees | Spaces |
| Existing |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Proposed |  |  |  |  |  |  |

Square feet of proposed structure \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ sq. ft.

Value of proposed structure $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. UTILITIES a. Water Source b. Sewage Facilities

( ) Public Water Service ( ) Public Sewer Service

( ) Private Well ( ) Septic Tank

( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Application is hereby made for an Initial Certificate of Zoning Compliance, as required under the Zoning Ordinance of the City of Chester, for the erection, relocation or alteration, and use of buildings and premises. In making this application the applicant represents all of the above statements and any attached maps and drawings to be a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit issued may be revoked without notice on any breach of representation or conditions.

It is understood that any permit issued on this application will not grant right of privilege to erect any structure or to use any premises described for any purpose or in any manner prohibited by the Zoning Ordinance, or by other ordinances, codes or regulations of Chester.

­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature:

3

(This page for office use only)

FINAL CERTIFICATE OF ZONING COMPLIANCE

The plans and specifications submitted with this application are in conformity with the zone district requirements applicable to the subject property. Changes in plans or specifications shall not be made without written approval of the appropriate city officials. Failure to comply with the above shall constitute a violation of the provisions of the Chester Zoning Ordinance.

This permit shall be a final permit when signed by the Administrator after a required final inspection upon completion of construction.

Permit issued ( ) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date)

Permit denied ( ) Reason for denial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of inspections: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Zoning Administrator

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A site plan must be attached or drawn below at a scale large enough for clarity showing the following information:

1. Indicate existing and proposed structures.
2. Location and dimensions of: Lot, buildings, driveways, and off-street parking spaces.
3. Distance between: Buildings and front, side, and rear lot lines;

Principal building and accessory buildings;

Principal building and principal buildings on adjacent lots.

D. Location of: Signs, easements, underground utilities, septic tanks, tile fields, water wells, etc.

E. Any additional information as may reasonably be required by the Zoning Administrator and applicable Sections of the Zoning Ordinance.

SITE PLAN