



Revised 3/21

## CITY OF SOUTH BELOIT, ILLINOIS ZONING APPLICATION FOR ACCESSORY STRUCTURES/USES/ADDITIONS

(Shed, Detached Garage, Swimming Pool, Additions)

Applicants Signature:		Date:
Applicant:	Telephone:	_ Email:
Property Owner:	Telephone:	_ Email:
Address of Property:		_
Property Parcel Number:		_
Property size: (square feet or act	res) Zoning Classification:	Corner Lot
Addition Type: Deck Primary Structure		
Detached Accessory Type: 200 square feet or more	199 square feet or less* Swi	imming Pool Other
*Applicable Fee:		
Layout (Top View): Indicate location of structure/us electrical/telephone lines and where applicable, the primary structure. Indicate the number of other acc Any other related information requested by staff to	well and septic system. Indicate decessory structures, identify them	limensions, setbacks, and distance from
Indicate if any of these apply: Floodway Floodplain	Engineer Clearance:	
Set Backs Structure Distance		
Zoning Clearance: Date:		
Zoning Conditions/Notes:		

Aerial photo from Wingis may be used to provide for lot specifications.

## **ATTESTATION**

Under penalty of intentional misrepresentation and/or perjury, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement(s) in compliance with all provisions of the applicable ordinances, rules and regulations of the City and any other applicable governing bodies. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit(s) herein applied for. I hereby grant the City, its employees and agents the temporary right to enter the property subject to this permit throughout the duration of the permit to complete any inspections as necessary to confirm compliance with all applicable ordinances, rules and regulations of the City and other governing bodies. I hereby agree to hold the City, its officers, employees, and agents harmless from any and all costs, damages, liabilities and attorneys' fees which may occur to be claimed to occur by reason of any work performed under this permit.

1. Any and all fees, related to this above selected project.	
Property Owner's Signature:	Date:
Contractor's Name (Printed):	
Contractor's Signature:	Date:

I agree to pay: