



Sangamon County Building & Zoning  
**OCCUPANCY APPLICATION**  
 Room 213, 200 S. Ninth Street, Springfield, IL 62701  
 (217) 753-6760 or (FAX) 535-3194 [zoning@co.sangamon.il.us](mailto:zoning@co.sangamon.il.us)

<b>FOR OFFICE USE ONLY</b>	
PERMIT#:	_____
PARCEL#:	_____
ZONING:	_____

**GENERAL INFORMATION**

Proposed Use: \_\_\_\_\_

Previous Use: \_\_\_\_\_

**Building permits may be needed if alterations are being made to building or need to be made to comply with the Sangamon County Building Codes.**

**OFFICE USE ONLY**

Special Stipulations: \_\_\_\_\_

Occupancy Load: \_\_\_\_\_

Building Code Edition Which Permit Is Issued:  
 IRC Section R105 \_\_\_\_\_ IBC Section 105 \_\_\_\_\_

- Building Code Type:  Residential       Commercial Type I  
 Type II  
 Type III  
 Type IV  
 Type V

Building Inspector: \_\_\_\_\_

Plumbing Inspector: \_\_\_\_\_

Mechanical Inspector: \_\_\_\_\_

Electrical Inspector: \_\_\_\_\_

Use & Occupancy Classification Groups:  
 Assembly \_\_\_\_\_ Business \_\_\_\_\_ Educational \_\_\_\_\_ Industrial \_\_\_\_\_ Institutional \_\_\_\_\_ Mercantile \_\_\_\_\_

Residential \_\_\_\_\_ Storage \_\_\_\_\_ High Hazard \_\_\_\_\_ Utility/Misc. \_\_\_\_\_

**Yes No**

Building Approved	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical Approved	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Approved	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing Approved	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>

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

**I certify that I am the owner or representative of the property which is the subject of this application, I hereby consent to the making of this application and the approval of the plans submitted herewith. I further consent to the inspection of this property in connection with this application as deemed necessary by the County agency. As the property owner or representative I assume the responsibility of locating any property lines, setback lines, easements, right of way, flood areas, etc., any construction within these areas may result in removal at the owner's or representative's expense. A Zoning Permit is valid for a period of six (6) months from date of approval and construction must commence and be worked on diligently thereafter or this permit may be canceled upon notification by the Zoning Administrator unless a written request is submitted to the Zoning Department within fourteen (14) days prior to expiration.**

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Applicant Signature	Applicant Printed Name	Date
Applicant is: <input type="checkbox"/> Building/property owner <input type="checkbox"/> General Contractor Representative <input type="checkbox"/> Tenant		
<input type="checkbox"/> Other _____		

**If not the property owner, an affidavit is required with parties signatures (owner/s and contractor) stating aware that a building permit is being applied for.**