



Village of Westchester

10300 West Roosevelt Road, Westchester, IL 60154
Phone: (708) 345-0199 • Fax: (708) 345-0884 • Email: Building@westchester-il.org

FOR OFFICE USE ONLY

PERMIT NO: _____
DATE ISSUED: _____
PAID: _____
CONTRACTORS: _____
APPROVED BY: _____
TITLE: _____

APPLICATION FOR SIDING, TUCKPOINTING & GUTTERS PERMIT

Date: _____ Site Address: _____

CONTRACTOR INFORMATION:

PROPERTY OWNER INFORMATION:

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

E-Mail: _____

E-mail: _____

Cost of Work: _____

DESCRIPTION OF WORK

Description of Work: Siding _____ Tuckpointing _____ Gutters _____ Other _____

Fees: Siding : \$80
Tuckpointing: \$25
Gutters: No Fee

No error or omission in either the plans or application, whether said plans or application have been approved by the Building Commissioner or not, shall permit to relieve the applicant from constructing the work in any other manner than that provided for in the Ordinance of this Village relating thereto. The Applicant having read this application and fully understanding the intent thereof declares that the statements made are true to the best of my knowledge and belief.

Signature: _____

Date: _____

Print Name: _____

Application Requirements:

- Application Form:** Fill out a copy of this application form.
- Contractor Information:**
 - a. If the owner will be applying for the permit and doing the work, "owner/self" should be written on the "Contractor" line of the permit.
 - b. If a contractor is doing the work, Contractor's Bond, Insurance and Licensing form and documents