

Permit # _____

Office Use Only



CITY OF JOLIET

Building & Inspectional Services

150 W. Jefferson Street, Joliet, IL 60432

Phone: 815-724-4070 Email: permitapplication@joliet.gov

Patio Permit Application

If permit applications are incomplete, and/or submitted without the required permit information and supporting documents, they will be returned to the applicant.

All Contractor's must submit a copy of the contract with all permit applications.

Address:		City:	
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Single Family **Multi-Family** - Number of Units _____

Is this property registered with the Neighborhood Services Rental Program? Yes No

Work Being Completed By: Homeowner Contractor

Homeowner's Name:

Address:

Phone:

Email:

Contractor's Name:

Address:

Phone:

Email:

Description of Work

Patio Dimensions: **Length:** ___ ft. ___ in. **Width:** ___ ft. ___ in.

Patio Type: Concrete Brick Pavers Other _____

Details: _____

Patio Roof: Yes No

Dimensions: **Length:** ___ ft. ___ in. **Width:** ___ ft. ___ in. **Height:** ___ ft. ___ in.

NOTE: A detailed roof construction drawing must be attached to your permit submittal!

Total Cost \$

Applicant Signature:

Date:

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Building Official Signature _____

Date _____