



VILLAGE OF TOWER LAKES

BUILDING PERMIT APPLICATION

PERMIT NUMBER

PERMIT ISSUE DATE

PROPERTY ADDRESS		PROPERTY TAX ID#	
PROPERTY OWNER		APPLICANT (IF DIFFERENT FROM OWNER)	
PROPERTY OWNER EMAIL		APPLICANT EMAIL	
PROPERTY OWNER PHONE	ALT PHONE	APPLICANT PHONE	ALT PHONE

PLEASE CHECK ONE:

☐ New Construction ☐ Addition ☐ Alteration

NOTE:

Demolition Permits **will not** be issued until a Building Permit has been approved by the Building Inspector.

PROJECT DESCRIPTION (Please be as specific as possible)

GENERAL CONTRACTOR		ADDRESS		PHONE	LICENSE #
ELECTRICIAN		ADDRESS		PHONE	LICENSE #
PLUMBER		ADDRESS		PHONE	LICENSE #
TOTAL SQ. FOOTAGE	STORIES	NUMBER OF BEDROOMS	NUMBER OF BATHROOMS	ESTIMATED COST OF PROJECT \$	

No error or omission in either the plans or application, whether said plans or application has been approved by the building inspector or not, shall permit or relieve the applicant from constructing work in any other manner than that provided for in the ordinance of The Village of Tower Lakes 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.

FOR OFFICE USE ONLY
Fee Schedule

Permit Fee: \$ _____

Road Fee: \$ _____

Other: \$ _____

Total Permit Fee: \$ _____

CREDIT / DEBIT CARDS ACCEPTED
IN PERSON ONLY AT VILLAGE HALL.
(HOURS POSTED ON VILLAGE WEBSITE)..

Credit ☐ Debit ☐ Check # _____

Received By: _____

Date: _____

SIGNATURE OF APPLICANT

DATE

PERMIT EXPIRATION	PERMIT ISSUED BY MUNICIPAL AGENT:
Permit expires on:	Name _____
_____	Date _____

FOR INSPECTIONS CALL: 847-529-8470