

**City of Rockford, Illinois**

Community & Economic Development Department  
 Construction and Development Services  
 425 East State Street, Rockford, IL 61104  
 Phone: (779) 348-7158 Fax: (815) 967-4243  
 Web: www.rockfordil.gov



**SIDING PERMIT APPLICATION**

App#

<b>Location &amp; Owner Information</b>			
Project Address			P.I.N.
<b>Type of Property:</b> <input type="radio"/> One Family <input type="radio"/> Two Family <input type="radio"/> Multi-Fam. (3+ Units) <input type="radio"/> Commercial/Industrial			
Company / Business Name (if commercial)			
Owner's Name	Phone	Fax/Email	
Owner's Address	City	State	Zip
<b>Siding Contractor</b>			
Company		Contact Person	
Address		City	State      Zip
Phone	Fax	Email	
<b>Description of Work</b>			
<input type="radio"/> Install New Siding Over Existing Siding/Materials <input type="radio"/> Remove Existing Siding and Install New Siding <input type="radio"/> Repair/Replace Portions of Existing Siding <input type="radio"/> Other:		<b>Location of Work:</b> (i.e. house, garage, etc.)	
		<b>Type of Siding:</b> (i.e. vinyl, aluminum, etc.)	
<b>Total Cost of Project</b> (Labor, Materials, Overhead & Profit):      \$		<b>Expected Start Date:</b>	<b>Expected Completion Date:</b>
As Owner or the Owner's authorized agent of the property for which this application is being filed, I hereby certify: <ol style="list-style-type: none"> <li>1. The description of work and information contained on this application is correct and;</li> <li>2. The project will comply with all conditions of approval requirements of applicable City Ordinances and pay all fees required by such ordinances and;</li> <li>3. If other than the owner, I am certifying that the proposed work has been authorized by the owner of record and that I have been authorized by the owner to complete this application on his/her behalf. I will be acting on behalf of the owner as his/her agent.</li> </ol>			
<b>Signature</b> X		<b>Date:</b>	

▼ THIS SECTION TO BE COMPLETED BY CITY STAFF ▼

Permit #: _____  Approved By: _____  Approval Date: _____	Permit Fee (1010-1000-60221)                      \$ <u>65.00</u>  Tech Fee (1010-1000-60228)                         \$ <u>6.50</u>  Total Fees:  <span style="float: right;">\$    <u>71.50</u></span>
City of Rockford Siding Permit	[Invoice No.: