



Application for Plan Review & Construction

Office of Inspections, City of East Moline, 912 16th Avenue, East Moline, IL 61244

General Instructions: This application is divided into seven sections. The first four sections should be filled out to the best of your ability, based on how you would like the project reviewed by the City Inspection, Engineering, and Development Staff. If you are not sure, or do not have all the information at the time of application, please note this in Section VI-Comments. Feel free to ask of any of the above staff members for assistance with this application at any time. Thank you for building or developing within the City of East Moline.

Section 1 – Nature of Application

Application is Hereby Made To: *(please print or type the description of services requested or work to be done)*

Work to be performed at: (Address)

Owner:

Owner Phone:

Owner Address:

Tenant:

Section 2 – Project Classification *(Please use residential bldg permit application for Residential 1 & 2 Family)*

Commercial/Industrial

Residential (over 2 family)

Zoning Classification

Intended Use:

Flood Plane Classification

Engineered Site Plan Required for All New Construction

Nature of Job: <input type="checkbox"/> Addition <input type="checkbox"/> Change of Use <input type="checkbox"/> Inspection <input type="checkbox"/> New Construction <input type="checkbox"/> Plan Review Only <input type="checkbox"/> Remodeling <input type="checkbox"/> Sidewalk <input type="checkbox"/> Approach	Type of Construction: <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td><input type="checkbox"/> I-FR</td> <td><input type="checkbox"/> II-FR</td> <td><input type="checkbox"/> II-1HR</td> <td><input type="checkbox"/> II-N</td> <td><input type="checkbox"/> III-1HR</td> </tr> <tr> <td><input type="checkbox"/> III-N</td> <td><input type="checkbox"/> IV-HT</td> <td><input type="checkbox"/> V-1 HR</td> <td><input type="checkbox"/> V-N</td> <td></td> </tr> </table>										<input type="checkbox"/> I-FR	<input type="checkbox"/> II-FR	<input type="checkbox"/> II-1HR	<input type="checkbox"/> II-N	<input type="checkbox"/> III-1HR	<input type="checkbox"/> III-N	<input type="checkbox"/> IV-HT	<input type="checkbox"/> V-1 HR	<input type="checkbox"/> V-N																							
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Area: _____			Height: _____				# of Stories: _____																																			

Section III - Confirmation

⇒ No error in either the plans or application, even after approval of the City Official, shall permit or relieve the applicant from constructing the work in any other manner than that provided for by the ordinances of this City relating hereto. The applicant having read this application and fully understanding the intent thereof declares that the statements made are true to the best of their knowledge and belief.

Applicant Signature: _____

Telephone: _____

City Official: _____

Date: _____

Cost of Construction	
Building:	_____
Electrical:	_____
Plumbing:	_____
Mechanical:	_____
Concrete:	_____
Other:	_____
Total Cost:	_____
Enterprise Zone:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section IV – Contractor Information

Plans Prepared For:

Telephone

Address:

IL Reg. No.

Engineer:

IL Reg. No.

General Contractor

Address

Phone

Electrical Contractor

Address

Phone

Plumbing Contractor

Address

Phone

Mechanical Contractor

Address

Phone

Sprinkler Contractor

Address

Phone

Roofing Contractor

Address

Phone

SECTION V - ATTACHMENTS

Building & Development Procedures

Issued

Not Issued

By: _____

Restaurant Guidelines

Issued

Not Issued

By: _____

Civil Engineering Guidelines

Issued

Not Issued

By: _____

Fire Protection Guidelines

Issued

Not Issued

By: _____

Other Guidelines _____

Issued

Not Issued

By: _____

SECTION VI - COMMENTS

SECTION VII - ROUTING - (Office Use Only)

	Received (Date)	Initial
Initial Review – City Planner		
Engineering Department		
Fire Inspector		
Health Inspector		
Plumbing & Mechanical Inspector		
Building Inspector		
Closing Review – City Planner		