



Village of Bloomingdale

201 S. Bloomingdale Rd.
Bloomingdale, IL 60108-1487

www.villageofbloomingdale.org

Village Hall Hours: Monday thru Friday 8:30AM – 4:30PM

Application For Code Review

Growth with Pride

Building & Zoning Department

buildingandzoning@vil.bloomingdale.il.us

phone: (630) 671-5660

fax: (630) 893-1596

REVIEW NUMBER
PROPERTY ID NUMBER
ZONING DISTRICT
REVIEWER

ADDRESS OF PROPERTY: _____ DATE: _____

APPLICANT NAME: _____ APP. PHONE: _____

OWNER NAME / BUSINESS NAME: _____ OWNER PHONE: _____

OWNER ADDRESS (IF DIFFERENT THAN ABOVE): _____

PHONE # TO CONTACT WHEN REVIEW IS READY: _____

CONTACT EMAIL: _____

PROPOSED PROJECT: _____ CONSTRUCTION COST: \$ _____

RESIDENTIAL BUSINESS INDUSTRIAL/MANUFACTURING; BUILDING OR STRUCTURE SQUARE FEET: _____

CONTACT INFORMATION:	ADDRESS:	PHONE:
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ARCHITECT: _____

GEN'L CONTR: _____

The undersigned hereby applies to the Village of Bloomingdale, Illinois for a VILLAGE CODE REVIEW herein described, the applicant shall comply with all requirements of the Village Ordinances relating thereto and pay the review fee required including any past due monies due to the Village, including, but not limited to any water and sewer rate charges associated with the above Address of Property. No error or omission in either the plans submitted for review or application requesting review, whether or not the plans or application have been reviewed or approved by the Building Official, shall permit or relieve the applicant from complying the Ordinances of this Village relating thereto.

REVIEW FEE(S) PAID TO INITIATE THE REQUESTED VILAGE CODE REVIEW PROCESS ARE NOT RETURNABLE UPON PAYMENT TO THE VILLAGE OF BLOOMINGDALE.

SIGNATURE OF AGENT OR OWNER

PRINT NAME

REVIEW FEES: \$ _____ PAID

RECEIPT NO.: _____
THE APPLICANT AGREES TO PAY ALL PLAN REVIEW FEES UPON SUBMITTAL. FEES PAID ARE NON-REFUNDABLE.