



City of Countryside Community Development Department
803 Joliet Road, Countryside, IL 60525 708-354-1860

Email application & supporting documents to
building@countryside-il.org & also supply 2 physical sets to address above.

Permit# _____

Fire Safety Permit Application

Date: _____ Cost of Work \$ _____ Non-Res Single Fam Multi-Fam (# Units _____)

Countryside Project Address: _____, Countryside IL 60525

Property Owner Name: _____ Phone: _____

Tenant Name(if applicable): _____ Phone: _____

Check one: Alarm Sprinkler ___ heads Suppression Hood Rack Hazardous F.M. 200

Describe Work Being Done: _____

PERMIT APPLICATION, PLANS & CUT SHEETS MUST BE EMAILED AND TWO (2) SETS OF PLANS MUST BE DELIVERED TO CITY OF COUNTRYSIDE COMMUNITY DEVELOPMENT DEPT. YOU WILL GET ONE (1) SET OF STAMPED PLANS BACK WITH YOUR PERMIT AND ONE (1) SET WILL BE GIVEN TO PLEASANTVIEW FIRE.

THE INSPECTIONS ARE SCHEDULED BY CALLING PLEASANTVIEW FIRE AT 708.352.9229

Permits are valid for one year; work must commence within six months. Should the permitted work not be completed within one year, the applicant must request in writing/email a permit extension within fifteen days of the permit expiration.

Refer to City Code Title 8-1-1: ADOPTION OF CODES for current code versions.

I hereby certify that I have the legal authority to make this application, and all information provided in this application and any other information provided by me in support of this application is true, complete and accurate to the best of my knowledge. I have read, do understand, and shall comply with all applicable terms and conditions required for this application. I also understand that I am responsible for all plan review fees, and I am also responsible to schedule all required inspections.

Fire Safety Company Name: _____

Address: _____ Phone: _____

Email: _____

Printed Name: _____ Signature: _____

OFFICE USE: Approved by Building Official _____ Date _____

COI Exp _____ License # _____ Lic Exp _____ Bond Exp _____

REV: 2/19/24