

# APPLICATION FOR PLAN REVIEW

SUBMIT TO: JAMES ANDERSON COMPANY  
 920 WEST NORTH SHORE DRIVE, LAKE BLUFF, IL 60044  
 PHONE (847) 295-3322



Project Site Address (Include Township)		PIN Number	Cost of Construction		
Project Name and Project Description					
Please provide email address for more efficient communication.		Check all that apply			
		<input type="checkbox"/>	Accessory Building	<input type="checkbox"/>	New Construction
		<input type="checkbox"/>	Addition	<input type="checkbox"/>	Permit Renewal
		<input type="checkbox"/>	Alteration	<input type="checkbox"/>	Plumbing
		<input type="checkbox"/>	Building	<input type="checkbox"/>	Pool
		<input type="checkbox"/>	Commercial	<input type="checkbox"/>	Potable Well
		<input type="checkbox"/>	Deck/Patio	<input type="checkbox"/>	Septic/Sewer
		<input type="checkbox"/>	Demolition	<input type="checkbox"/>	Sign
		<input type="checkbox"/>	Electric	<input type="checkbox"/>	Single Family Residence
		<input type="checkbox"/>	Fence	<input type="checkbox"/>	Tenant Buildout
		<input type="checkbox"/>	Garage	<input type="checkbox"/>	Other
		<input type="checkbox"/>	HVAC		
<input type="checkbox"/>	Industrial				
Name	Street Address City Zip		Contact Information		
Property Owner/Permittee			Phone		
			Email		
Applicant			Phone		
			Email		
Architect/Engineer			Phone		
			Email		
Property Description					
Zoning District (R1, R2, O/R, H)					
Lot Size/Acres/Dimensions					
Structure Size					

Owner's Representative Legal Statement	
All information provided herein is true and correct and all provisions of the ordinances of the Village of Mettawa shall be complied with. I hereby certify that the proposed work is authorized by the owner on record and that I have been authorized by the owner to submit this application as his/her agent.	
Print Name of Applicant:	
Signature of Applicant:	
Date:	
Approved by:	Approval date:
Fire Prevention:	Building:
Engineering:	Lake Co. Pub. Works/NSSD: