



**City of Blue Island**  
**Building & Zoning Department**  
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[www.blueisland.org/forms](http://www.blueisland.org/forms)

**PLUMBING PERMITS**

ADDRESS OF WORK: \_\_\_\_\_

OWNER'S NAME/PHONE: \_\_\_\_\_

HOME ADDRESS OF OWNER: \_\_\_\_\_

ESTIMATED COST: \_\_\_\_\_

**TYPE OF BUILDING**

RESIDENTIAL     COMMERCIAL     INDUSTRIAL     MIXED-USE

**DESCRIPTION OF WORK**

NEW CONSTRUCTION     REMODEL     REPAIR     OVERHEAD SEWERS

SEWER     WATER TAP     WATER SERVICE     PARKWAY

STREET OPENING     SPRINKLER SYSTEM

NO. OF FIXTURES EXISTING: \_\_\_\_\_

NO. OF FIXTURES: \_\_\_\_\_ CIRCLE ONE: NEW or REPLACE

(Including: sump pump, water heater, grease traps,  
laundry trays, automatic washers, automatic dishwashers,  
garbage disposals)

NAME OF CONTRACTOR DOING WORK: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

FEE: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

PERMIT NO: \_\_\_\_\_ DATE: \_\_\_\_\_

INSPECTIONS: \_\_\_\_\_