

Illinois

210 N. Hamilton St. Monticello, IL 61856 www.cityofmonticello.net

Office (217) 762-2583 Fax: (217) 762-9307 taj@cityofmonticello.net

Procedure for Building a Garage

- 1. Make sure your detached garage meets City zoning requirements:
 - a. Detached garages are not allowed in front yards, only in side and rear yards
 - b. Corner lots have two front yards, two side yards and no rear yards
 - c. Detached garages must be at least 5' from the side and rear property lines
 - d. Detached garages must be at least 10' from the house
 - e. Garages cannot exceed 1,000 square feet in size or 17' in height
 - f. Detached garages cannot be located in an easement, if a garage is constructed in an easement the garage may be moved and/or destroyed in the course of work within an easement. The property owner will not be compensated for any damage.
- 2. Contact the City for a building permit application and complete it.
- 3. Submit the following materials to the city:
 - a. Complete application
- b. A site plan showing where the garage will be located on the property (can use aerial from city)
 - c. A plan and picture of the garage
 - d. Permit fee of \$50 (checks made payable to the City of Monticello)
- **4.** Locate your property pins, mark pins and location of garage. If pins cannot be located the city reserves the right to require a survey to locate/set pins.
- 5. Request a J.U.L.I.E. utility locate (1.800.892.0123 or www.illinois1call.com) at least 48 hours prior to starting work.
- 6. Build a garage

Note:

- * The city has information on the easements in the newer subdivisions. If the city does not have easement information on your property, it is the responsibility of the property owner to obtain that information from the county recorder's office or abstract company.
- * An aerial photograph of your property is available from the City.
- * Your permit is good for 1 year from the date of issue.
- * The City of Monticello follows building codes: International Residential Code (ORC) 2003, National Electrical Code (NEC) 2005, Illinois State Plumbing Code 2004.



Date:				
JOB SITE ADDRESS:				
SUBDIVISION:		LOT #:		
PROPERTY OWNER				
Address:				
Phone:				
BUILDING TYPE: Resid	dential	Commercial Industrial		
LOT SIZE: BY				
TYPE OF IMPROVEMENT:	New Building	Addition		
	Demolition	Moving		
PLEASE SPECIFY THE PROPOSED	USE:			
RESIDENTIAL:		NON- RESIDENTIAL:		
Single Family		Amusement, recreational		
Two or Multi-Famil	у	Church, other religious		
Garage		Industrial		
Shed		Parking Garage		
Carport		Service Station, repair garage		
Other- Specify		Office, bank, professional		
		School, library, other educational		
		Stores, mercantile		
		Other- Specify		
DECCRIRE THE WORK TO BE DON	ıE.			
DESCRIBE THE WORK TO BE DON	E			
ANTICIPATED START DATE:				
TOTAL ESTIMATED PROJECT COS				
ESIIWIA I EIJ PRIJIEL I (() 🗙	• •			

PROPOSED SQUA	ARE FOOTAGE:			
Building:	Garage:	Addition:	Shed:	_
_	•	"None" in the blank w se include street, city, s	here the information req	uested in not
CONTRACTOR: _				
Mailing Address:				
ARCHITECT OR E	NGINEER:			
PLUMBING CONT	TRACTOR:			
ELECTRICAL CON	TRACTOR:			
Mailing Address:				
HVAC CONTRACT	ГОR:			
ROOFING CONTR	RACTOR:			
Mailing Address:				
Phone:				
Illinois License #:				
SPRINKLER CONT	TRACTOR:			
Mailing Address:				
Phone:				
PRINCIPAL TYPE	OF FRAME: W	/ood C	oncrete Steel	
FOUNDATION: _	Basement	Crawlspace	Concrete Slab	Skids
ROOF: Co	mposition (shingle)	Cedar Shakes	Other- Specif	V

NOMBER OF STORIES:			
FIREPLACE: Yes No			
PRINCIPAL TYPE OF HEATING FUEL:	Gas	Oil	Electricity
	Coal	Other- Specify	
TYPE OF SEWAGE DISPOSAL:	Public	Private (Septic	Tank, etc)
TYPE OF WATER SUPPLY: If Public:	Public	Private (well)	
Size of water line:	³⁄," 1"	1 1/4"	Other – Specify
			- Specify
WILL THERE BE CENTRAL AIR CONDI	TIONING?		
WILL THERE BE AN ELEVATOR?	Yes No		
NUMBER OF OFF-STREET PARKING S	SPACES: Enclosed		Outdoors
***PLEASE SUBMIT: One set of site programmer for new home construction, please s	_		the location of improvement.
***PLEASE NOTE: All property pins are located and the location of t			•
***PLEASE NOTE: The following buil 2003, State Plumbing Code 2004, Na	•	•	
WHO IS THE PRIMARY CONTACT PER PROJECT?	RSON FOR ANY QUEST	TIONS OR CON	CERNS IN REGARDS TO THIS
Name:			
Address:			
Phone:	Mobil I	Phone:	
I hereby certify that the proposed wo	ork is authorized by th	e owner or rec	ord and I have been
authorized by the owner to make thi	s application as his au	thorized agent	and we agree to conform to
all applicable laws of this jurisdiction			
Signature of Applicant		Applica	ation Date
			ee: