

ANNUAL INSPECTION APPLICATION



Village of South Chicago Heights Building Department
3317 Chicago Road/P.O. Box 770
South Chicago Heights, IL 60412-0770
Phone: 708-755-1880 ◆ Fax: 708-755-1881

Address of Rental Property: _____

Owner: _____ Owner's Phone No. _____

Owner's Address
(street/city/state/zip) _____

Total No. of Units: _____ No. of Units to be inspected: _____

INSPECTION FEE: \$

FOR OWNER- OCCUPIED APARTMENT BUILDING/HOUSES:

2 – 3 Units	\$50.00-Annual Fee	Per Unit Fee-\$20.00
4 – 6 Units	\$50.00-Annual Fee	Per Unit Fee-\$20.00

FOR OWNER [NON-OCCUPIED] APARTMENT BUILDING(S)/HOUSES:

Single Family	\$100.00-per building	Per Unit Fee-\$0
2 – 6 Units	\$100.00-per building	Per Unit Fee-\$25.00

ALL OTHER APARTMENT BUILDINGS REGARDLESS OF OWNER OF RECORD OCCUPANCY:

More than 6 Units	\$100.00-per building	Per Unit Fee-\$25.00
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*******NOTE: ALL UTILITIES MUST BE ON BY THE DATE OF INSPECTION*******
FAILURE TO KEEP SCHEDULED APPOINTMENT WILL INCUR A \$25.00 PENALTY UNLESS
NOTICE OF CANCELLATION IS GIVEN 24 HOURS PRIOR TO INSPECTION.

Applicant's
Signature _____ Date _____

FOR OFFICE USE ONLY: Day/Date of Inspection _____ Time _____

Inspector's Name:

