

Deck Permit Application

CITY OF CLINTON
DEPT. OF ZONING, BUILDING & PUBLIC SAFETY
118 W. WASHINGTON ST.
CLINTON, IL 61727 PHONE: 217-935-6552

OFFICE USE ONLY

Permit# _____
Date: _____
Zoned: _____
Issued: _____
Fee: _____

Parcel Number: _____

Project Address: _____

Owner: _____ Phone: _____

Contractor: _____ Phone: _____

Contractor Address: _____

Anticipated Start Date: _____

Anticipated Completion Date: _____

Est. Total Value of Project: \$ _____

Height of deck off ground: _____

Height of guardrail: _____

Size and spacing of guardrail posts: _____

Size of deck: _____

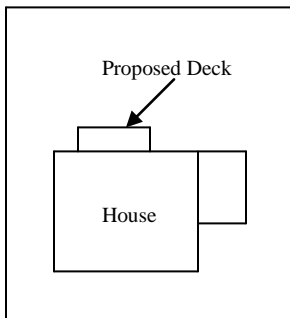
Size of ledger: _____

Size and spacing of posts: _____

Size of beams: _____

Size and spacing of joists, location of double joists: _____

Sample Plan



Framing Sample

Your Plan

A large empty rectangular box for drawing the applicant's deck plan.

Zoning Officer: _____