## APPLICATION FOR PATIO/DECK PERMIT \$50.00

## VILLAGE OF OKAWVILLE 304 N Front Street – PO Box 483 Okawville, IL 62271 Phone (618)243-5972

(D	o not write in this space For office use only)	
Date:	Zoning fee paid: \$	
( ) Permit issue No ( ) Permit denied ( ) Application appealed No ( ) Variance or Special Permit N	If denied, cause of denial:	
	ICANTS: All information required by the applicants are encouraged to visit the Village Hall or a this form.	
1. Name of property owner(s): _	Phone:	
Complete mailing address:		
Property Owners Signature re	equired if Rental Property:	
2. Applicant's name:	Phone:	
Complete mailing address:		
3. Property interest of applicant	(Owner, Renter, etc.):	
4. Property address of proposed	Patio/Deck:	
5AttachedDe	tached.	
6. Zoning District:		
showing the following: a) Dimensions of the zoning lot; b) Dimensions and use of all buic c) Distance of each building from d) Distance between accessory by	ildings (show overall dimensions of house includi	ing garage if applicable);
Signature		Date