



Application for Advisory Review
 4000 North Olcott Avenue
 Norridge, Illinois 60706
 Phone: 708.453.0311 ■ Fax: 708.453.1971
 Building@villageofnorridge.com

Property Information (please print)

Street Address		
City	State	Zip
Case Number (Office Use)	Zoning District	PIN

Property Owner Information (please print)

Name		
Street Address		
City	State	Zip
Phone	Fax	Other (Cell/Email)

Applicant (please print)

Name		
Street Address		
City	State	Zip
Phone	Fax	Other (Cell/Email)

Architect/Design Professional (please print)

Name		
Street Address		
City	State	Zip
Phone	Fax	Other (Cell/Email)

As the undersigned Applicant, I hereby certify that the above statements and attached documentation are true to the best of my knowledge. I further certify that I have read and understand the Rules and Procedures of the Advisory Review Committee. I also understand that the Advisory Review Committee and pertinent departments of the Village may make modifications to the project. Once this review is completed, I must apply for the necessary permits to carry out the project.

Type of Project

1. Is this a Residential or Commercial Project? (Circle One) Residential or Commercial
 - a. If Residential is this: (Circle One)
 - i. Single Family
 - ii. Second Floor Addition
 - iii. Multi-Residential Project
 - b. If this is a Commercial Project please describe it on a separate letter addressed to the Board.

 Applicant Signature

 Date