

Village of Westchester

10300 West Roosevelt Road, Westchester, IL 60154
Phone: (708) 345-0199 • Email: Building@westchester-il.gov

Date Neceived			

APPLICATION FOR WINDOW & DOOR PERMIT

Site Address:

Name of Property Owner:	Phone: Email:		
Address:			
Contractor:	Phone:		
Contractor Address:	Email:		
Description of work:			
Cost of work:			
Descrip	TION OF WORK		
Window Replacement & Glass Bock Windows:	Fees: Residential	Commercial	
1-5 Windows:	\$50	\$100 + \$10 per additional	
6-10 Windows:	\$100	window	
11+ Windows:	\$150		
Total Number of Windows:			
Doors:	Fees:		
Number of Doors:	\$30	\$75	
New Window Openings & Awnings:	Plan review will be required. Review, permit and inspection fees to be		
U-Factor of Windows/Doors:		_	
No error or omission in either the plans or application, whether said relieve the applicant from constructing the work in any other mannered this application and fully understanding the intent thereof	er than that provided for in the Ordinar	ce of this Village relating thereto. The Applicant having	

Application Requirements:

- Application Form: Fill out a copy of this application form.
- Provide a signed contract with detail scope of work (all vendors must be registered prior to permit release)
- Provide manufacture spec sheet and U-factor detail