

PLEASE PROVIDE THE TOWN OF CICERO WITH
THE FOLLOWING INFORMATION

Property address you are purchasing: _____

All Buyer's Names: _____

Address of current residence: _____

Phone Number/Cell Number: _____

Name of Mortgage Company: _____

Address of Mortgage Company: _____

Phone Number: _____

Number of Units of Building you are purchasing: _____

Is this Building Being Owner occupied: Yes No

We will need a copy of your identification, such as
Drivers License or State ID. Thank you.



TOWN OF CICERO
BUILDING DEPARTMENT

4949 W Cermak Road • Cicero, Illinois 60804 • 708.656.3600 • Fax 708.656.9708

TOM M. TOMSCHIN
Building Commissioner

BUYER(S) HEATING AND ROOFING AFFIDAVIT

I/We _____, purchaser(s) of the property located at:

_____ (the Property) Cicero, Illinois, understand that the Town of Cicero Code Enforcement Inspectors do not inspect the heating unit or the condition of the roof. I/We further understand that the Certificate of Compliance issued by the Town of Cicero does not address the condition of the roofing or heating systems of the Property.

I understand that I have the option to have a licensed and bonded contractor perform an inspection prior to the purchase of the Property at my/our expense.

Buyer

Date

Buyer

Date

Buyer

Date

SWORN AND SUBSCRIBED TO BEFORE ME

THIS _____ DAY OF _____, 20____

(Seal)

Notary Public



TOWN OF CICERO
BUILDING DEPARTMENT

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TOM M. TOMSCHIN
Building Commissioner

AFFIDAVIT

I/We _____, the purchaser(s) of property located at:
_____, Cicero, Illinois, do hereby state that I/we have
purchased the above-mentioned property as a single family home/multiple unit building, consisting of
_____ total apartment(s).

I/We further agree that no additional apartments are to be installed, increasing the total number of apartments without prior approval from the Town of Cicero. I/We also am/are aware that failure to abide by the rules and regulations could result in fines up to \$500.00 per day in addition to mandatory deconversion.

I/We hereby grant the Town of Cicero permission to inspect the property when there is a reason to believe that the premises are not being maintained in compliance with the Ordinance Codes of the Town of Cicero, regarding the number of allowable apartments.

In consideration of the mutual agreement, a Certificate of Compliance is issued by the Town of Cicero.

I/We do hereby acknowledge that the garbage cans are the property of the Town of Cicero and cannot be transferred by Bill of Sale. The number of garbage cans at the property address is _____.

Garbage cans can be replaced at a cost of \$75.00 per can.

It is my/our responsibility to ensure that the garbage cans remain with the property immediately after closing.

Buyer

Date

Buyer

Date

Buyer

Date

SWORN AND SUBSCRIBED TO BEFORE ME
THIS _____ DAY OF _____, 20____

Notary Public

(Seal)



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TOM M. TOMSCHIN
Building Commissioner

OCCUPANCY AFFIDAVIT

I/We _____, on oath, depose and state as follows:

1. That the above-mentioned person(s) is/are the purchaser(s) of:
_____ (property address), Cicero, IL
2. That the undersigned understands that every room occupied for sleeping purposes by one occupant must contain at least 70 square feet of floor area. (**International Property Maintenance 2009, Chapter 3, Section PM404.4.1**)
3. That the undersigned understand that a violation of the occupancy limitations will result in a fine of \$750.00 per offense and that each day shall constitute a separate offense.
4. Further affiant sayeth naught.

Buyer

Date

Buyer

Date

Buyer

Date

SWORN AND SUBSCRIBED TO BEFORE ME

THIS _____ DAY OF _____, 20____

Notary Public

(Seal)