

VOID IF CERTIFICATE/ESCROW NOT ISSUED WITHIN
6 MONTHS OF INITIAL INSPECTION DATE



TOWN OF CICERO
BUILDING DEPARTMENT
4949 W. CERMAK ROAD, CICERO, IL 60804
(708) 656-3600

PROPERTY TYPE	
<input type="checkbox"/>	SINGLE UNIT
<input type="checkbox"/>	TWO UNIT
<input type="checkbox"/>	THREE UNIT
<input type="checkbox"/>	FOUR UNIT
<input type="checkbox"/>	_____ UNIT
<input type="checkbox"/>	COMMERCIAL SQ. FT.: _____
<input type="checkbox"/>	VACANT LOT

OFFICE USE ONLY	
COMPLIANCE #	
INSPECTION DATE	
INSPECTION TIME	
INSPECTOR #	
DATE FILED	
FEE	
BILLED # WATER	
TAX # UNITS	
AMOUNT DUE	
RECEIPT #	

\$25 NO SHOW FEE
SO FOR ALL MISSED
INSPECTIONS

CERTIFICATE OF COMPLIANCE APPLICATION

THIS APPLICATION SHALL BE FILED NO LESS THAN 30 DAYS PRIOR TO THE TRANSFER OF THE PROPERTY LISTING SHEET SHOULD ACCOMPANY APPLICATION

Address: _____ PIN #: _____ Zone: _____

Seller Info

Name _____
Address _____
Phone # _____
email _____

Seller Info

Name _____
Address _____
Phone # _____
email _____

Buyer Info

Name _____
Address _____
Phone # _____
email _____

Buyer Info

Name _____
Address _____
Phone # _____
email _____

Sellers Realtor Info

REALTOR NAME: _____
Company: _____
Phone #: _____
REALTOR EMAIL: _____

Buyers Realtor Info

REALTOR NAME: _____
Company: _____
Phone #: _____
REALTOR EMAIL: _____

No additional apartments are to be installed, increasing the total number of apartments without prior approval from the Town of Cicero is unlawful. Failure to abide by the rules and regulations could result in fines up to \$500.00 per day in addition to mandatory deconversion.

Town of Cicero Code Enforcement Inspectors do not inspect the heating unit or the condition of the roof. The Certificate of Compliance issued by the Town of Cicero does not address the condition of the roofing or heating systems of the Property.

Every room occupied for sleeping purposes by one occupant must contain at least 70 square feet of floor area. (International Property Maintenance 2009, Chapter 4, Section PM404.4.1)

Inspection reports should be made available within 2 business days of the initial inspection.



TOWN OF CICERO ZONING DETERMINATION REQUEST FORM

1. NAME: _____ 2. PROPERTY LOCATION: _____

3. NAME OF ALL PROPERTY OWNERS: _____

4. YOUR ADDRESS: _____

5. PHONE NUMBER (S):

HOME: _____

WORK: _____

CELL PHONE: _____

FAX NUMBER: _____

6. TYPE OF PROPERTY (MARK ALL THAT APPLY):

SINGLE FAMILY _____ 2-UNITS _____ 3-UNITS _____ 4-UNITS _____

5-10 UNITS _____ COMM APT. _____ COMMERCIAL _____ MANUFACTURING _____

VACANT LOT _____ VACANT PROPERTY _____ OTHER _____

7. IF THERE IS ANY COMMERCIAL OR MANUFACTURING USE AT THE LISTED LOCATION, PLEASE EXPLAIN AND LIST THE TYPE OF USE:

8. REASON FOR REQUEST: _____

CICERO LEGAL/ZONING DEPARTMENT ONLY: ZONING DETERMINATION

Based on the Cicero Zoning Ordinance of February 07, 1977, the address listed above is zoned as:

R-1 R-2 R-3 R-4 C-1 C-2 M-1 M-2 M-3 RRFBD (P) (T) (A) (ROOSEVELT ROAD FORM BASED DISTRICT)

The self-described use of the property listed above is zoned as:

- IN COMPLIANCE with the Zoning Ordinance.
NOT IN COMPLIANCE with the Zoning Ordinance and notice should be sent to owner .
requires cert for nonconforming status requires other zoning relief.
LEGAL NONCONFORMING GRANTED AS A ON
OK, if the 2nd unit LEGALLY existed prior to October, 1990, or was new construction after October 2000.
OK if the use LEGALLY existed prior to October 26, 2010 in the Roosevelt Road Form-Based Zoning.

Legal/Zoning Department Date