

DEPARTMENT OF BUILDING AND
ZONING
OF COOK COUNTY, ILLINOIS

Timothy P. Bleuher
COMMISSIONER OF BUILDING AND ZONING
OF COOK COUNTY



County Administration Building
69 W. Washington, Suite 2830
Chicago, IL 60602-3169
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FAX (312) 603-9940
TDD (800) 526-0857

GENERAL REQUIREMENTS

PLUMBING REGISTRATIONS

1. Illinois Plumbing Contractor's Registration license as issued by the Illinois Department of Public Health.
2. Applicant's State Plumber license or Chicago Journeyman Plumber's license.
3. On company letterhead; name, address and phone number for three (3) recently completed installations.
4. On the same letterhead as above; name, address and phone number for three (3) business references i.e. bank, supply house or general contractor.
5. Certificate of Insurance for \$1,000,000 liability naming Cook County Department of Building and Zoning as Certificate Holder only.
6. A notarized Child Support Compliance Data Form.

REGISTRATION

Until further notice, all registrations are to be submitted by email directly to the Plumbing Department at ciro.gaimari@cookcountyil.gov. Once the registration application is complete an invoice will be emailed to you with further directions regarding payment.

CORPORATIONS

ONLY a corporate officer holding the state plumbing license for the corporation may register. At which time a copy of the previous year's ANNUAL DOMESTIC CORPORATION report must be submitted.

QUESTIONS

Any questions, please feel free to contact **Ciro Gaimari, Plumbing Inspector/Plan Examiner**, at
(312) 603-0514

or

email ciro.gaimari@cookcountyil.gov



**DEPARTMENT OF BUILDING AND ZONING
APPLICATION FOR REGISTRATION**

OFFICE USE ONLY- REGISTRATION NO.

PL-	SE-	WA-
FP-	GC-	I-
SP-	TI-	W-

PLEASE PRINT LEGIBLY

BUSINESS NAME: _____
ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____
TELEPHONE () _____ **FAX ()** _____ **CELL ()** _____
E-MAIL ADDRESS: _____

FACILITY ADDRESS IF MAILING ADDRESS IS P.O. BOX

ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TYPE OF OWNERSHIP

- Sole Proprietorship
 Partnership (one partner must hold state plumbing license, if applicable)
Name, address and phone number of each partner:

- Corporation (one corporate officer must hold state plumbing license, if applicable)
List exact full corporate name on file with Secretary of State:

CORPORATE POSITION APPLICANT HOLDS: _____

APPLICANT

NAME: _____
ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____
APPLICANT'S SIGNATURE: _____
DATE: _____

CONTRACTOR'S REGISTRATION AFFIDAVIT

1. I certify that the statements in this application for a Contractor's Registration number are true and correct to the best of my knowledge and belief.
2. I also certify that I shall obtain a copy of the Cook County Building Ordinances and will abide by the applicable provisions before, during, and after erection, construction, alterations, relocation and demolition.
3. I understand that it is my obligation to secure a building permit and to notify the Building Commissioner when a structure is completed in order for me to obtain a Certificate of Occupancy.

Failure to do this is an automatic violation of the Cook County Building Ordinance, Certificate of Compliance, Section 102-105 (3) 1.a (1), whichever is applicable and will be referred to the Cook County State's Attorney's Office for appropriate action.

4. I further certify that I am aware of state statutes prohibiting bribes and shall not make any offers or give contributions or gratuities to influence their action. Any such activity will be referred to the Cook County State's Attorney's Office for appropriate action.
5. Finally, I am aware of the PERMIT PENALTY FEE RESOLUTION of \$420.00 for single family residence and \$945.00 for all other construction started without or exceeding departmental permit approval.

CLASSIFICATION:

PLUMBING PRIVATE SEWERAGE SEWER WELL / PUMP

FIRE PROTECTION GAS CONNECTOR IRRIGATION

TANK INSTALLER WATER

APPLICANT

DATE: _____

Cook County Affidavit of Child Support Obligations

Effective July 1, 1998, every applicant for a County Privilege shall be in full compliance with any Child Support Order before such applicant is entitled to receive or renew a County Privilege. When Delinquent Child Support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

"Applicant" means any person or business entity, including all Substantial Owners, seeking issuance of a County Privilege or renewal of an existing County Privilege from the County. This term shall not include any political subdivision of the federal or state government, including units of local government, and not-for-profit organizations.

"County Privilege" means any business license, including but not limited to liquor dealer's licenses, packaged goods licenses, tavern licenses, restaurant licenses, and gun licenses; real property licenses or lease; permit, including but not limited to building permits, zoning permits or approvals; environmental certificate; County Home Loan; and contracts exceeding the value of \$10,000.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole partnership, Substantial Owner means that individual or sole proprietor.

All Applicants/Substantial Owners are required to complete this affidavit and comply with the Child Support Enforcement Ordinance before any privilege is granted. Signature of this form constitutes a certification that the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information.

Privilege Information:

County Privilege: Contractor Registration

County Department: Building and Zoning

Applicant Information

Last Name: _____ First Name: _____ MI: _____

SS# (Last four digits): _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone#: (____) _____ - _____ Driver's License#: _____

Child Support Obligation Information:

The undersigned applicant, being duly sworn on oath or affirmation hereby states that, to the best of my knowledge: (place an "X" next to "A", "B", "C", or "D")

- A. The applicant has no judicially or administratively ordered child support obligations.
- B. The applicant has outstanding judicially or administratively ordered obligation, but is paying in accordance with the terms of the order.
- C. The applicant is delinquent in paying judicially or administratively ordered child support obligations.
- D. The applicant is not a substantial owner as defined above.

The undersigned applicant understands that failure to disclose any judicially or administratively ordered child support debt owed will be grounds for revoking the privilege.

Signature: _____ Date: _____

Subscribed and sworn to before me this

_____ day of _____, 20_____

_____, Notary Public

Note: The above information is subject to verification prior to the award of the contract.