

**BUILDING PERMIT**

Residential

CITY OF DECATUR, ILLINOIS  
INSPECTION DIVISION  
424-2787

Permit Number: **2018-1151**

Zoning Abbr: R-3

Commerce Code: ADD/ALT - RESIDENTIAL

Building Use: DECKS & PORCHES

Work Class: ADDITION

LOCATION OF WORK:

**185 W IMBODEN DR**

APPLICANT:

IMBODEN CREEK HEALTH SERVICES  
185 W IMBODEN DR  
DECATUR IL 625215237

WORK DESCRIPTION:

Displacement of existing deck-680sf

CONTRACTORS

Building:                      Owner

CONSTRUCTION COST: \$72,684.00

PERMIT FEE:            \$102.00

**REQUIRED BY LAW ALL WORK MUST BE INSPECTED PRIOR TO BEING CONCEALED AND UPON COMPLETION OF WORK.**

The undersigned is the owner \_\_\_\_\_ authorized agent \_\_\_\_\_ of the described real property.

Signature of Applicant: \_\_\_\_\_

This permit is issued solely for the purpose set forth in the application approved on 11/27/2018 and is conditional upon strict compliance with provisions of the Zoning Regulations and the Building code now in force. This construction permit is subject to revocation upon any violations of the Zoning Regulations to the Building Code.

**Payment Summary**

|                      |               |
|----------------------|---------------|
| Building Permit Fee: | 102.00        |
| Engineering Permits: | 0             |
| Credit Memos Used:   | 0.00          |
| <b>Total Due:</b>    | <b>102.00</b> |
| Fee Paid:            | \$102.00      |
| Pay Type:            | Check         |
| Receipt #:           | 1555          |

\_\_\_\_\_  
**Building Inspections Manager**  
(permit is not valid unless signed by the Inspections Supervisor or designee)

|                   |            |
|-------------------|------------|
| Application Date: | 00/00/0000 |
| Issue Date:       | 11/27/2018 |
| Expire Date:      | 5/26/2019  |