

## Village of Skokie Condominium Conversion Application Community Development - Building Division

Phone (847) 933-8223 - Fax (847) 933-8230

Building Name (if applicable)/Address of the proposed Condo	minium
Number of units in project	
The following information must be submitted with this Condo	minium Conversion Application
- 2 copies condominium Plat of Survey  - 1 copy Architectural Plans of I (Certified as built to condition	
	Date
The undersigned hereby makes application for the conversion Village of Skokie, Illinois, in accordance with the ordinances plans and specifications herewith submitted.	
Owner #1 Name*	Telephone #
Address	_ Fax #
Developer	
Address	Fax #
Management Company	_ Telephone #
Address	Fax #
Attorney	Telephone #
Address	Fax #
Has notice of intent conversion letter been sent to all tenants? If yes, on what date were they sent? Date	
Sprinkler/Alarm system Yes No Describe areas	
Owner #1 Name*	
Address	Zip Code
I hereby consent to an inspection of the described building and which I am the legal owner	d all common areas and apartment units of
Signature of Consent	
* If more than 1 owner please complete reverse side	
Fee Schedule:	

Owner #2 Name	Telephone #
Address	Zip Code
Signature of Consent	_
I hereby consent to an inspection of the described building and which I am the legal owner	all common areas and apartment units of
Onwer #3 Name	Telephone #
Address	Zip Code
Signature of Consent	
I hereby consent to an inspection of the described building and which I am the legal owner	all common areas and apartment units of
Owner #4 Name	Telephone #
Address	Zip Code
Signature of Consent	

I hereby consent to an inspection of the described building and all common areas and apartment units of which I am the legal owner