

FOR OFFICE USE ONLY

BUILDING # _____ ELECTRICAL # _____ MECHANICAL # _____ PLUMBING # _____

1 & 2 Family Dwelling PERMITS APPLICATION

CITY of LOVES PARK BUILDING DEPARTMENT
100 HEART BOULEVARD, LOVES PARK, ILLINOIS, 61111 (815) 654-5033 FAX (815) 654-5004

APPLICATION DATE _____
STREET ADDRESS _____
ADDRESS RANGE OF BLDG _____
LOT # _____ SUBDIVISION _____
PARCEL TYPE: Residential Commercial Industrial Other _____

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Township _____ Inventory Zone _____
Census Tract _____ Ward _____
Plat Page _____

ALL INFORMATION MUST BE COMPLETED BY
PLANNING PRIOR TO DATA ENTRY.
Data Entry By: _____

OWNER INFORMATION:

PROPERTY OWNER'S NAME _____ PHONE _____
STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

IMPROVEMENT TYPE: (Check one)

New Construction Addition Alteration Repair/Replacement Demolition Fire Repair Other _____

PROPOSED USE: (Check all that apply)

Residential

Single Family Single Family Attached Condominium Two-Family Manufactured Building
 Accessory Structure -- Attached Detached Garage Shed Deck Pool Spa
 Other _____

BUILDING APPLICATION

BUILDING CONTRACTOR INFORMATION

CONTRACTOR TO DO WORK _____ PHONE _____
BILL TO: _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____
CONCRETE CONTRACTOR _____ PHONE _____
ROOFING CONTRACTOR _____ LICENSE # _____

BUILDING INFORMATION: (Complete all that apply) Other _____

New Dwelling Units (#) _____ Partial Baths (#) _____ Building Area (Sq. Ft.) _____
Existing Dwelling Units (#) _____ Garages (#) _____ Living Area (Sq. Ft.) _____
Stories (#) _____ Garage Area (Sq. Ft.) _____ Basement Area (Sq. Ft.) _____
Bedrooms (#) _____ Fireplaces (#) _____ Decks (Sq. Ft.) _____
Full Baths (#) _____

DESCRIPTION OF WORK:

STRUCTURAL FRAME: Steel Concrete Masonry Wood Other _____

EXTERIOR WALLS: Steel Concrete Masonry Wood Other _____

STRUCTURAL ASSEMBLIES FABRICATED OFF-SITE: _____

ESTIMATED BUILDING VALUE: \$ _____ **BUILDING PERMIT FEE \$** _____
(To be calculated using sq ft. calculation as specified in Loves Park Bldg. Dept. fee schedule.)

ELECTRICAL APPLICATION

ELECTRICAL CONTRACTOR INFORMATION

CONTRACTOR TO DO WORK _____ PHONE _____
BILL TO: _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____

DESCRIPTION OF WORK:

(TURN OVER TO COMPLETE)

TYPE: (Check all that apply)

New Service Upgrading Service Temporary Service Rewiring New Wiring

Total Service _____ Amps (Includes 1 meter and 1 panel) Number of Additional Service Meters _____ Number of Secondary (Sub) Panels _____

Above Ground Pool In Ground Pool Electric Baseboard Heat Electric Furnace (Mech. App. Required)

Residential New Construction Sq./Ft. (Living or Habitable Space) _____ Per Unit Other _____

Alarm System: Installers Name _____ State License # _____

ELECTRICAL PERMIT FEE \$ _____

MECHANICAL APPLICATION

MECHANICAL CONTRACTOR INFORMATION

CONTRACTOR TO DO WORK _____ PHONE _____

BILL TO: _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____

DESCRIPTION OF WORK:

NEW OR REPLACEMENT UNITS (Enter quantity of EACH unit):

____ Forced Air Furnace _____ BTUs (per unit) ____ Hot Water Heat _____ BTUs (per unit) ____ Steam Heat _____ BTUs (per unit)

____ Electric Baseboard Heat ____ Electric Furnace ____ Air Conditioning _____ TON or BTUs (circle one) (per unit)

____ Other _____ ____ Exhaust Fan _____ CFM (per unit)

Number of Gas Piping Outlets _____ ____ # of Fireplaces MECHANICAL PERMIT FEE \$ _____

PLUMBING APPLICATION

PLUMBING CONTRACTOR INFORMATION

CONTRACTOR TO DO WORK _____ PHONE _____

ILLINOIS STATE CONTRACTOR'S PLUMBING LICENSE NO. _____

BILL TO: _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____

ENTER NUMBER OF FIXTURE OPENINGS BEING INSTALLED, REPLACED, OR REPAIRED:

____ Floor Drains	____ Sewer Service	____ Water Heaters	____ Water Softeners (rough-in)
____ Toilets	____ Water Service	____ Sump Pumps	____ Water Softeners (installation)
____ Bath tub/Whirlpool	____ Garbage Disposal	____ Clothes Washer Standpipe	____ # Gas piping outlets
____ Sewage Ejectors	____ Lavatories	____ Washer Box	____ Backflow Prevention Device
____ Laundry Tubs	____ Sinks	____ Fire Sprinklers (Heads?)	____ Other _____
____ Dishwashers	____ Shower Stalls	____ Lawn Sprinklers	

Total Number of Fixtures Openings _____ PLUMBING PERMIT FEE \$ _____

WATER MAIN TAP-IN/ CONNECTION FEES:

NOTE: The Plumbing Permit shall not be issued unless the TAP-IN Fees have been paid by the Owner/General Contractor/Developer

Does this project require a tap-in to a public water main? Yes No If yes, what size? _____

There is a Permit Fee of: (\$) _____ Has this fee been paid by the Owner/General Contractor/Developer? Yes No

Other _____

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WATER CONNECTION FEE \$ _____ SCHOOL DISTRICT EXACTION FEE \$ _____

PERMIT FEES \$ _____ (This includes a \$40.00 Processing Fee) Application Issued By: _____

*******CERTIFICATION*******

I hereby declare I am the owner of the above premises, or have been duly authorized by the owner there of to make this application and agreement. I further declare that all the information contained herein or attached hereto is true and correct. In consideration of and upon issuance of a building permit, I will do or allow to be done only the work applied for herein, and further declare that the premises and it's existing and proposed buildings and structures will be used for the purposes set forth in this application.

Signature of applicant _____ Address _____ Phone # _____