



CITY OF LOVES PARK
APPLICATION FOR PLAN EXAMINATION

IMPORTANT: Applicant is to complete all items in Section I, II, and III

I. LOCATION OF BUILDING / OWNER INFORMATION

Address of Property: Zoning District:

Lot: Block: Subdivision:

Owner: (Name) (Mailing Address) (Zip) (Phone #)

II. TYPE AND COST OF BUILDING - All Applicants are to complete A-G

A. TYPE OF IMPROVEMENT

- New Building
Addition
Alteration
Repair, replacement
Demolition (indicate use in Part B)
Moving (relocation)
Temporary - 30 days only

C. CONSTRUCTION CLASSIFICATION (Must mark one)

- Type 1A Type 1B (Noncombustible/Protected)
Type 2A (Noncombustible/Protected)
Type 2B (Noncombustible)
Type 3A Type 3B (Combustible/Protected)
Type 4 (Heavy Timber)
Type 5A (Combustible/Protected)
Type 5B (Combustible)

B. PROPOSED USE RESIDENTIAL

(Excludes single or duplex residences):

- R-1 (Transient)
R-2 (Permanent)
R-3 (Permanent/Boarding)
R-4 (Permanent/Supervised)
Multi-Family # of Units
Bedrooms per Unit
Full Bathrooms per Unit
Partial Bathrooms per Unit
Garage # Carport

D. DIMENSIONS

Stories Height
Length Width
Square Feet per floor (footprint)
Total Sq. Ft. per building (all floors)

E. # OF OFF STREET PARKING SPACES

Enclosed Outdoors

F. VALUATION OF CONSTRUCTION

\$

COMMERCIAL (Nonresidential):

- Assembly
Business
Factory/Industrial
High Hazard
Institutional
Mercantile
Storage
Educational
Type U-Specify

G. DESCRIPTION OF WORK AND USE

Blank lines for description of work and use

NOTE: As of 9/1/2025, construction and technical submissions submitted for plan review shall be submitted as follows: one (1) set of digital plans/documents in PDF format. The digital set shall include seals, signatures, and dates. All specifications and technical submissions shall also be required to be submitted as noted above. This application must be filled out and plan review fee of \$600 must be paid prior to the commencement of plan review. This will cover the first five hours of plan review. Additional hours will be billed at \$125 per hour.

III. IDENTIFICATION – To be completed by all applicants

Required:

	NAME	MAILING ADDRESS & E-MAIL	PHONE & FAX #
Architect			
Engineer			

If known at time of application:

Building Contractor			
Electrical Contractor			
Plumbing Contractor			
Mechanical Contractor			

The undersigned hereby applies to the City of Loves Park, Illinois for a permit to erect the structure or part thereof herein described, and if granted, the permit applied for shall comply with all requirements of the City Ordinances relating thereto and pay the fees required. No error or omission in either the plans or application, whether said plans or application have been approved by the Building Official or not, shall permit or relieve the applicant from constructing the work in any other manner than that provided for in the Codes adopted by the City.

I hereby certify that the proposed work is authorized by the Owner of Record and that I have been authorized by the Owner to make this application as the agent. The applicant having read this application and fully understanding the intent thereof declares that the statements made are true to the best of my knowledge and belief.

ALL PLAN REVIEW CORRESPONDENCE WILL BE FORWARDED TO THE ARCHITECT AND/OR ENGINEER LISTED ABOVE, INCLUDING BY ELECTRONIC MEANS.

Applicant Name: _____ Date: _____

Address: _____
(Street, City, State, Zip Code)

Phone: _____ Fax: _____ E-mail: _____

Signature: _____



CITY OF LOVES PARK, ILLINOIS

WATER USE DATA SHEET

SERVICE ADDRESS: _____

APPLICATION DATE: _____ OWNER: _____

ARCHITECT: _____ PHONE: _____

CONTRACTOR: _____ PHONE: _____

TYPE OF OCCUPANCY: _____

FIRST FLOOR ELEV.: _____ FT. MSL TOP FLOOR ELEV.: _____ FT. MSL

FIXTURE COUNTS

Dishwasher	_____	Lavatory	_____
Sink – single	_____	Toilet – tank	_____
- multiple	_____	- valve	_____
- restaurant	_____	Shower (only)	_____
- service	_____	Tub	_____
- laundry	_____	Urinal - tank	_____
Clothes washer	_____	- valve	_____
Drinking fountain	_____	Sill cock	_____
Other (describe)	_____		_____

OTHER DEMANDS

Cooling water	_____ GPM	@	_____ PSI
Process water	_____ GPM	@	_____ PSI
Fire suppression	_____ GPM	@	_____ PSI
Irrigation	_____ GPM	@	_____ PSI

WATER METER SIZE AS SPECIFIED PER SUBMITTED PLANS: _____ DATE: _____

APPROVED REVISED TO _____ (WATER METER SIZE)



**City of Loves Park
Storm Water Detention
User Fee Data Sheet**

_____	_____
Owner	Contractor
_____	_____
Owner Address	Contractor Address
_____	_____
Owner Telephone	Company Telephone
_____	_____
Point of Contact (POC)	Point of Contact (POC)
_____	_____
POC Telephone	POC Telephone

Project Information

Street Address			
_____	_____	_____	_____
Subdivision	Lot	Block	Property Code (PIN)

Calculation for Storm Water Detention Fee

		Existing	Modification
1. Roof Area (Projected on the ground surface)		_____	_____ SF
2. Pavements (Including sidewalks)		_____	_____ SF
3. Pervious Surface (Undeveloped/Landscaping)		_____	_____ SF
4. Total Area of Parcel	Acres	_____	_____ SF