

Village of New Lenox  
Community Development  
1 Veterans Parkway  
New Lenox, IL 60451  
815.462.6490  
815.462.6469(fax)  
[www.newlenox.net](http://www.newlenox.net)

# the Village of New Lenox

"Home of Proud Americans"



## New Construction Application – Multi-Family

PERMIT #: \_\_\_\_\_

### SITE INFORMATION

PROPERTY ADDRESS: \_\_\_\_\_  
PROPERTY INDEX NUMBER (P.I.N.): \_\_\_\_\_  
SUBDIVISION: \_\_\_\_\_ LOT #: \_\_\_\_\_

### APPLICANT INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

### BUILDING OWNER INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

**\*\* BUILDING OWNER INFORMATION MUST BE FILLED OUT IN ORDER FOR THE PERMIT APPLICATION TO BE ACCEPTED.**

### BUILDING INFORMATION

BUILDING USE: \_\_\_\_\_  
ESTIMATED VALUE OF CONSTRUCTION: \_\_\_\_\_  
DESCRIPTION OF WORK: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I HEREBY CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO CONFORM TO ALL GOVERNING INFORMATION AND REGULATIONS SET FORTH BY THE NEW LENOX VILLAGE BOARD.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

## CONTRACTOR LIST

TYPE OF CONTRACTOR	NAME OF CONTRACTOR	REGISTRATION NUMBER
ARCHITECT		
GENERAL		
FOUNDATION		
EXCAVATOR		
CARPENTER		
MASON		
PLUMBER		
ELECTRICIAN		
ROOFER		
HVAC		
DRYWALL		
SEWER/WATER		
SIDING/SOFFIT/GUTTERS		
FLOOR COVERINGS		
PAINTER		
INSULATOR		
WATERPROOFER		
ACCOUSTICAL		
GLAZING		
PAVER		
LANDSCAPER		
SPRINKLER SYSTEM		
OTHER		

**UNDERGROUND SPRINKLER SYSTEMS:** A COPY OF THE CERTIFICATION FOR THE BACKFLOW PREVENTER IS TO BE SUBMITTED TO THE COMMUNITY DEVELOPMENT DEPARTMENT UPON COMPLETION OF THE SYSTEM.

PLEASE NOTE THAT THE BUILDING PERMIT CANNOT BE ISSUED UNTIL ALL CONTRACTORS FOR THIS PROJECT ARE REGISTERED WITH THE VILLAGE.

## **BUILDING CHECKLIST – MULTI-FAMILY**

EACH APPLICANT IS RESPONSIBLE FOR SUBMITTING THE FOLLOWING APPLICABLE ITEMS. DRAWINGS SHALL BE ARCHITECTURAL OR ENGINEERING DRAWINGS WITH DIMENSIONS APPROPRIATELY SHOWN. **APPLICATION FOR A BUILDING PERMIT SHALL NOT BE COMPLETE UNTIL ALL APPLICABLE DETAILS ON THE CHECKLIST HAVE BEEN SATISFIED.**

	<u><b>APPLICANT'S INITIALS</b></u>	<u><b>VILLAGE INITIALS</b></u>
1. THREE (3) SETS OF DRAWINGS	_____	_____
2. SITE PLAN DETAIL SHEET (2 COPIES)	_____	_____
3. PARKING PLAN DETAIL SHEET	_____	_____
4. FOUNDATION DETAIL SHEET	_____	_____
5. FLOOR PLANS	_____	_____
6. WALL CONSTRUCTION DETAIL SHEET	_____	_____
7. APPLICABLE SEATING CAPACITY SHEET	_____	_____
8. FLOOR CONSTRUCTION DETAIL SHEET	_____	_____
9. ROOF/CEILING CONSTRUCTION DETAIL SHEET	_____	_____
10. CHIMNEY/FIREPLACE AND CHASE DETAIL	_____	_____
11. MECHANICAL DETAIL SHEET	_____	_____
12. PLUMBING DETAIL SHEET	_____	_____
13. ELECTRICAL DETAIL SHEET	_____	_____
14. ACCESSIBILITY DETAIL SHEET	_____	_____
15. EXTERIOR SIGN DETAIL SHEET (A SEPARATE SIGN PERMIT IS REQUIRED FOR EACH PROPOSED SIGN)	_____	_____
16. SOILS REPORT	_____	_____
17. STRUCTURAL CALCULATIONS	_____	_____
18. ARCHITECTURAL SEAL	_____	_____
19. DRAINAGE CERTIFICATE, COMPLETED	_____	_____
20. EROSION CONTROL PERMIT, COMPLETED	_____	_____
21. OPEN SPACE FEE RECEIPTS	_____	_____
22. STEEL SHOP DRAWINGS	_____	_____
23. LANDSCAPE PLAN	_____	_____
24. CONSTRUCTION TRAILER PERMIT (IF APPLICABLE) (A SEPARATE TEMPORARY USE PERMIT APPLICATION MUST BE SUBMITTED FOR EACH TRADE REQUIRING A CONSTRUCTION TRAILER)	_____	_____
25. ENERGY CODE CALCULATIONS – 2015 IECC	_____	_____

## PLAN REVIEW NON-REFUNDABLE DEPOSIT

I HAVE SUBMITTED BUILDING PLANS TO THE VILLAGE OF NEW LENOX COMMUNITY DEVELOPMENT DEPARTMENT FOR REVIEW. I AM AWARE THAT AS THE APPLICANT FOR THE BUILDING PERMIT, I AM RESPONSIBLE FOR ALL COSTS INCURRED FOR THE REVIEW OF THE BUILDING PLANS IN ACCORDANCE WITH THE FEE SCHEDULE, EVEN IN THE EVENT THE BUILDING PERMIT IS NOT ISSUED OR THE PROJECT DOES NOT PROCEED FOR ANY REASON.

I UNDERSTAND THAT THE PLAN REVIEW DEPOSIT SHALL BE DUE AND PAYABLE AT THE TIME OF APPLICATION TO THE COMMUNITY DEVELOPMENT DEPARTMENT. **ALL PLAN REVIEW DEPOSITS ARE NON-REFUNDABLE.**

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

ESTIMATED VALUE OF PROJECT: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_ **VILLAGE USE ONLY** \_\_\_\_\_

PLAN REVIEW DEPOSIT AMOUNT:     \$ \_\_\_\_\_

FORM OF PAYMENT:                     \_\_\_\_\_

DATE PAID:                             \_\_\_\_\_

## **DRAINAGE CERTIFICATE**

The undersigned, \_\_\_\_\_, hereby affirms and acknowledges as follows, to wit:

1. That I am the applicant, or the authorized agent for the applicant, with the Village of New Lenox, IL.
2. That certain drainage requirements must be met with regards to the subject lot in order to comply with the comprehensive drainage plan.
3. That I have been given the drainage plan for the subject lot.
4. That I have reviewed said drainage plan and that I have been given the opportunity to seek professional review of same.
5. That, further, I understand and agree to comply with the drainage plan and that I will not alter that plan or interfere with the comprehensive drainage plan.

I hereby declare that the above and attached information is correct and agree to do or allow to be done only such activity as herewith are set forth above. I have read the above and agree to comply with the same.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(NOTARY PUBLIC)

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## Site Development Permit Application – Multi-Family Residential

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### APPLICANT INFORMATION:

APPLICANT: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

### OWNER INFORMATION:

OWNER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

### DEVELOPER INFORMATION:

DEVELOPER: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

### CONSULTANT INFORMATION:

CONSULTANT: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

### SITE LOCATION:

ADDRESS: \_\_\_\_\_  
SUBDIVISION: \_\_\_\_\_ LOT #: \_\_\_\_\_

DESCRIPTION OF PROPOSED WORK: \_\_\_\_\_  
\_\_\_\_\_

MEASURES PROPOSED TO CONTROL EROSION AND SEDIMENTATION: \_\_\_\_\_  
\_\_\_\_\_

NPDES PERMIT # ILR: \_\_\_\_\_  
CONSTRUCTION START DATE: \_\_\_\_\_ FINAL COMPLETION DATE: \_\_\_\_\_

*If reference here is made to specific construction plans and specifications, said plans and specifications are hereby made a part of this application and the certification hereon is construed to include said plans and specifications.*

In consideration of this application and the issuance of this permit:

1. (I/We) will conform to the regulations set forth in the Erosion and Sedimentation Control Ordinance (Chapter 38, Article II) of the Municipal Code of the Village of New Lenox.
2. (I/We) agree that all work performed under this permit will be in accordance with the plans that accompany this application, except for such changes as may be authorized by the Village Engineer.
3. (I/We) agree to take whatever steps necessary to attain the objectives of said Erosion and Sedimentation Control Ordinance as required by the Village of New Lenox.
4. (I/We) also agree to contain any and all impacts resulting from erosion or sedimentation to the confines of the property described above.

\_\_\_\_\_ Date: \_\_\_\_\_  
(Applicant)

SUBSCRIBED AND SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
(NOTARY PUBLIC)

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FOR OFFICE USE ONLY

APPROVED BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_