

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

the Village of New Lenox

"Home of Proud Americans"



Remodeling Permit Application – Commercial/Industrial

PERMIT #: _____

SITE/BUSINESS INFORMATION

BUSINESS NAME: _____
PROPERTY ADDRESS: _____
PROPERTY INDEX NUMBER (P.I.N.): _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____ BUSINESS REGISTRATION #: _____

APPLICANT INFORMATION

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____

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

CONTRACTOR TYPE	CONTRACTOR NAME	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 – COMMERCIAL/INDUSTRIAL

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 DETAILS ON THE CHECKLIST HAVE BEEN SATISFIED.

	<u>APPLICANT'S INITIALS</u>	<u>VILLAGE INITIALS</u>
1. THREE (3) SETS OF DRAWINGS	_____	_____
2. SITE PLAN DETAIL SHEET	_____	_____
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. STEEL SHOP DRAWINGS	_____	_____
22. LANDSCAPE PLAN	_____	_____
23. CONSTRUCTION TRAILER PERMIT (IF APPLICABLE) (A SEPARATE TEMPORARY USE PERMIT APPLICATION MUST BE SUBMITTED FOR EACH TRADE REQUIRING A CONSTRUCTION TRAILER)	_____	_____
24. ENERGY CODE CALCULATIONS – 2015 IECC	_____	_____
25. INFORMATION REGARDING FIRE SUPPRESSION	_____	_____

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: _____