



APPLICATION FOR BUILDING PERMIT

Applicant: _____ Phone No: _____

JOB LOCATION & LOT INFORMATION

Property Use (circle one) Residential Commercial Industrial

Street Address: _____ Lot No. _____

Subdivision: _____ P.I.N. _____ - _____ - _____

Model: _____ Stories: _____ Garage: _____

Additional Information: Bedroom(s): _____ Bathroom(s): _____ Square Footage: _____

Township (circle one): Aurora Batavia Blackberry Sugar Grove

IMPROVEMENT TYPE: (circle one)

- | | | | |
|-----------------------|----------------------|------------------------|--------------------|
| 1 New Residential | 2 New Commercial | 3 New Multi-Family | 4 Demolition |
| 5 Residential Remodel | 6 Commercial Remodel | 7 Multi-Family Remodel | 8 Basement Remodel |
| 9 Deck/Gazebo/Pergola | 10 Driveway | 11 Garage | 12 Lawn Sprinkler |
| 13 Patio | 14 Shed | 15 Swimming Pool | 16 Roofing |
| 17 Siding | 18 Windows | 19 Other _____ | |

Total Estimated Cost of Project: \$ _____ **Fair Market Value:** \$ _____

PROPERTY OWNER(S):

Property Owner: _____ Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

CONTRACTOR(S):

General Contractor: _____ Office Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Plumbing Contractor: _____ Plumber's License # _____

Roofing Contractor: _____ Roofer's License # _____

PLEASE COMPLETE THE BACK SIDE OF APPLICATION

Please Note:

****All new construction and commercial remodeling/build-outs must have a Fox Metro sanitary connection permit.**

****Copy of State Plumber's or Roofer's License required with ALL applications doing plumbing or roofing work.**

****Applicant must submit two (2) **copies** of the current plat of survey showing all existing improvements and showing the location of the proposed work drawn to scale.

Applicants must submit **two (2) copies** of the building plans, **four (4) copies** if commercial. Plans should include all views of the proposed work, including size, top view of all floors, foundation plan, electric and plumbing locations, cross sections, elevations, etc. Please include any additional drawings or details that may be necessary to show work.

Architect's Seal (Illinois) required on all commercial, industrial, multi-family structures and on homes of 2000 square feet or more. **(Required by State of Illinois, Department of Professional Regulations).**

Provide if applicable: Flood plain, curb cut permit, parking plan, KDOT and IDOT permit and permits from Fox Metro Water Reclamation District and Kane County Department of Transportation Impact Fee.

I hereby certify that I am the owner of record or the owner of record authorizes the proposed work, and I have been authorized to act in his/her behalf as the agent. I agree to conform to all the laws and Ordinances of the Village of North Aurora, Illinois.

Printed Name: _____ **Date:** _____

Signature: _____

FOR OFFICE USE

Approved by: _____ Date: _____

Fox Metro Permit Received: _____

Total Fee: _____

Village of North Aurora
25 E. State Street
North Aurora, IL 60542

www.northaurora.org

Community Development
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