



THE CITY OF LAKE FOREST  
COMMUNITY DEVELOPMENT DEPARTMENT  
800 N. FIELD DRIVE, LAKE FOREST, IL 60045  
P: (847)810-3502 OR (847)810-3503/3521, F: (847)615-4383  
WWW.CITYOFLAKEFOREST.COM

### MULTI-FAMILY OR COMMERCIAL ADDITION OR ALTERATION PERMIT REQUIREMENTS

*The following is required for a complete permit submittal for each unit.*

- MULTI-FAMILY OR COMMERCIAL BUILDING PERMIT, ELECTRIC PERMIT, HVAC PERMIT, PLUMBING PERMIT, ROOFING PERMIT AND GRADING WAIVER APPLICATION.** Submit only those applications that apply to this project.
- HOMEOWNER'S ASSOCIATION APPROVAL.** Required if your subdivision has an active homeowner's association and the proposed work requires their approval.
- PLAN REVIEW FEE.** According to the current fee schedule.
- 3 COPIES OF THE CURRENT PLAT OF SURVEY.** The plat shall show all existing and proposed conditions including structures, zoning setback lines, utility easements and utility services. **This is required for additions, new structures and hardscape work only.**
- 3 COPIES OF DETAILED WORKING DRAWINGS.** Provide scaled drawings. Plans shall be stamped by a State of Illinois Registered Architect. All structural drawings must be stamped by a Structural Engineer.
- TECHNICAL SUBMISSION FORM.** Required for projects with proposed changes to a fire suppression system.
- BOARD OR COMMISSION REQUIRED INFORMATION.** If your project was reviewed by a Board or Commission, please review your Action Summary or Certificate of Appropriateness from the meeting and submit two copies of any of the required information indicated on that summary.
- TREE REMOVAL PERMIT APPLICATION.** For any tree removal work is proposed with this project.
- ZONING COMPLIANCE APPLICATION.** For Commercial Permits only.

*Prior to issuance of the permit, the following information shall be up to date or submitted to the Community Development Department:*

- PLUMBER'S STATE OF ILLINOIS LICENSE.** In addition, a Lake Forest Plumber's Bond and a Certificate of Insurance (listing the City of Lake Forest as additional insured) is required ***IF*** any connections to the sanitary, storm or water services are proposed or work to the existing service is proposed in the public right-of-way.
- PLUMBER'S LETTER OF INTENT.** This letter must be original.
- ELECTRICIAN'S LICENSE.**
- ILLINOIS STATE ROOFING LICENSE.**
- HVAC CONTRACTOR'S LICENSE.** This license may NOT be a business license.

Please note: ALL fire protection permit applications and shop drawings for the project will be required for submittal, approval and issuance prior to any rough inspections. You may submit the appropriate permit application and shop drawings at the time of permit submittal if they are complete.



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**MULTI FAMILY DWELLING OR  
 COMMERCIAL BUILDING  
 PERMIT APPLICATION #:** \_\_\_\_\_

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

*Includes Multi Family or Commercial Additions, Alterations, Demolition of Structures, Siding, Windows, Foundation Repairs and Storage Tank Installations*

<b>PROJECT ADDRESS:</b>		
<b>PROPERTY OWNER:</b>		<b>PHONE:</b>
<b>MAILING ADDRESS (IF DIFFERENT THAN ABOVE):</b>		
<b>PROPERTY OWNER'S EMAIL ADDRESS:</b>		
<b>TENANT NAME/CONTACT INFORMATION:</b>		
<b>GENERAL CONTRACTOR:</b>		
<b>MAILING ADDRESS:</b>		
<b>PHONE:</b>		<b>FAX:</b>
<b>EMAIL ADDRESS:</b>		<b>CELL:</b>

**DESCRIBE THE PROPOSED PROJECT:** \_\_\_\_\_

**WHAT IS THE TOTAL SQUARE FOOTAGE OF THE PROPOSED CONSTRUCTION?** \_\_\_\_\_

**IS AN ELEVATOR PROPOSED FOR THIS PROJECT?** \_\_\_\_\_

**IS THERE ANY HAZARDOUS MATERIAL STORAGE EXISTING OR PROPOSED ON SITE?** \_\_\_\_\_

**\$\_\_\_\_\_** is the fair market value of the project including all materials, trades, architectural and engineering fees.

As Property Owner, I hereby agree and acknowledge that all work must be done in accordance with Codes adopted by The City of Lake Forest Code and must be consistent with the approved plans. As Owner, I declare that all information submitted in support of the requested permit is accurate. Falsification of any information will result in penalties as provided for in the Code. By signing this form, owner assumes responsibility for the accuracy of the information provided by the contractor.

*Signature of Property Owner:* \_\_\_\_\_

*Signature of Owner's Authorized Designee (must have Designee Form attached):* \_\_\_\_\_

*Printed Name:* \_\_\_\_\_ *Contact Phone Number:* \_\_\_\_\_

**FOR OFFICE USE ONLY:**

<b>BUILDING PERMIT FEE:</b>	\$ _____	<b>PLAN REVISIONS:</b>	\$ _____
<b>PLAN REVIEW FEE:</b>	\$ _____	<b>LIFE SAFETY REVIEW:</b>	\$ _____
<b>PUBLIC PROPERTY BOND:</b>	\$ _____	<b>STOP WORK ORDER:</b>	\$ _____
<b>PERMIT RENEWAL BOND:</b>	\$ _____	<b>ENGINEERING REVISION:</b>	\$ _____
<b>DRAINAGE WAIVER FEE:</b>	\$ _____	<b>TREE FENCING FEE:</b>	\$ _____
<b>PLAN REVIEW (OVER 2 HRS):</b>	\$ _____	<b>OTHER:</b>	\$ _____
<b>TOTAL FEES:</b>		\$ _____	



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**ELECTRIC PERMIT APPLICATION**  
 #: \_\_\_\_\_  
 DATE: \_\_\_\_\_

<b>PROJECT ADDRESS:</b>	
<b>PROPERTY OWNER:</b>	<b>PHONE:</b>
<b>MAILING ADDRESS (IF DIFFERENT THAN ABOVE):</b>	
<b>PROPERTY OWNER'S EMAIL ADDRESS:</b>	
<b>ELECTRIC CONTRACTOR:</b>	
<b>MAILING ADDRESS:</b>	
<b>PHONE:</b>	<b>FAX:</b>
<b>LICENSE #:</b>	<b>ISSUED BY:</b>

<b>EXISTING ELECTRIC SERVICE:</b>	_____ AMPS	___ OVERHEAD
	_____/_____/_____ VOLTAGE	___ UNDERGROUND
<b>PROPOSED ELECTRIC SERVICE:</b>	_____ AMPS	___ OVERHEAD ___ UNDERGROUND
	_____/_____/_____ VOLTAGE	___ TEMPORARY
<b>QUANTITIES OF GENERAL WIRING:</b>	_____ OUTLETS	_____ FIXTURES (INC. EXHAUST FANS)
		_____ SWITCHES
<b>LOW VOLTAGE WIRING:</b>	_____ CONTROL/SIGNAL	_____ VOICE/DATA/VIDEO _____ ALARM/SAFETY DEVICE
<b>ELECTRIC HEATING:</b> (600 V.A. AND LARGER)	_____ TOTAL K.V.A.	_____ TYPE OF HEATING UNIT
<b>ELECTRIC MOTORS:</b>	_____ MOTORS	_____ TOTAL COMBINED H.P.
		_____ H.P. OF LARGEST MOTOR
<b>AIR CONDITIONING UNITS:</b>	_____ NUMBER OF UNITS	_____ TOTAL K.V.A.
<b>STANDBY GENERATOR:</b>	_____ H. P. OF MOTOR	_____ OUTPUT IN K.V.A.
<b>LANDSCAPE LIGHTING:</b>	_____ OUTLETS	_____ FIXTURES

**OTHER WORK:** \_\_\_\_\_

As Property Owner, I hereby agree and acknowledge that all work must be done in accordance with Codes adopted by The City of Lake Forest Code and must be consistent with the approved plans. As Owner, I declare that all information submitted in support of the requested permit is accurate. Falsification of any information will result in penalties as provided for in the Code. By signing this form, owner assumes responsibility for the accuracy of the information provided by the contractor.

Signature of Property Owner: \_\_\_\_\_

Signature of Owner's Authorized Designee (must have Designee Form attached): \_\_\_\_\_

Printed Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

<b>ELECTRIC PERMIT BASE FEE:</b>	\$ _____	<b>PER UNIT CHARGE:</b>	\$ _____
<b>ELECTRIC SERVICE FEE:</b>	\$ _____	<b>MOTORS:</b>	\$ _____
<b>TOTAL FEES: \$ _____</b>			



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**HVAC PERMIT APPLICATION**  
 #:  
 \_\_\_\_\_  
 DATE: \_\_\_\_\_

<b>PROJECT ADDRESS:</b>	
<b>PROPERTY OWNER:</b>	<b>PHONE:</b>
<b>MAILING ADDRESS (IF DIFFERENT THAN ABOVE):</b>	
<b>PROPERTY OWNER'S EMAIL ADDRESS:</b>	
<b>HVAC CONTRACTOR:</b>	
<b>MAILING ADDRESS:</b>	
<b>PHONE:</b>	<b>FAX:</b>
<b>LICENSE #:</b>	<b>ISSUED BY:</b>

TYPE OF UNIT:	NUMBER OF UNITS:	EQUIPMENT LOCATION:	EQUIPMENT INFORMATION:
<b>AIR CONDITIONER</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ GEOTHERMAL ____ AMPS
<b>AIR HANDLER</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ GEOTHERMAL ____ AMPS
<b>BOILER</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ GEOTHERMAL ____ AMPS ____ /1000 BTUS ____ EFFICIENCY RATING
<b>EXHAUST SYSTEM LARGER THAN 1 H.P.</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ AMPS
<b>FURNACE</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ GEOTHERMAL ____ AMPS ____ /1000 BTUS ____ EFFICIENCY RATING
<b>ROOFTOP COMBINATION</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ EFFICIENCY RATING ____ AMPS ____ /1000 BTUS
<b>UNIT/WALL HEATER</b>	____ NEW ____ REPLACEMENT		____ PHASE ____ VOLTS ____ EFFICIENCY RATING ____ AMPS ____ /1000 BTUS
<b>DUCT WORK:</b> ____ YES ____ NO		<b>OTHER WORK:</b> _____	

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Signature of Property Owner: \_\_\_\_\_

Signature of Owner's Authorized Designee (must have Designee Form attached): \_\_\_\_\_

Printed Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

<b>HVAC PERMIT FEE:</b> \$ _____	<b>STOP WORK ORDER:</b> \$ _____
<b>TOTAL FEES:</b> \$ _____	



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**PLUMBING PERMIT APPLICATION #:** \_\_\_\_\_

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

<b>PROJECT ADDRESS:</b>	
<b>PROPERTY OWNER:</b>	<b>PHONE:</b>
<b>MAILING ADDRESS (IF DIFFERENT THAN ABOVE):</b>	
<b>PROPERTY OWNER'S EMAIL ADDRESS:</b>	
<b>PLUMBING CONTRACTOR:</b>	
<b>MAILING ADDRESS:</b>	
<b>PHONE:</b>	<b>FAX:</b>
<b>STATE OF ILLINOIS LICENSE #: 055-</b>	

**NUMBER OF NEW OR REPLACED PLUMBING FIXTURES**

___ CLOTHES WASHER	___ HOSE BIB	___ SUMP PUMP	___ ICE MAKER	___ BATHTUB	___ SHOWER
___ SEWAGE EJECTOR	___ FLOOR DRAIN	___ DISPOSAL	___ DISHWASHER	___ BAR SINK	___ BOILER
___ WATER HEATER	___ TOILET (BIDET)	___ LAUNDRY TUB	___ LAVATORIES	___ SINK	___ TOTAL FIXTURES

**SWIMMING POOL AND IRRIGATION SYSTEM INFORMATION:**

___ # OF IRRIGATION SYSTEM HEADS	___ IS A RPZ VALVE PROPOSED?
___ ARE HEADS PROPOSED ON THE CITY RIGHT OF WAY?	___ POOL/SPA PIPING

**SEWER AND WATER INFORMATION:**

DESCRIBE THE <b>EMERGENCY REPAIR:</b> _____		
___ # OF FEET OF SANITARY SEWER	___ 1 1/2" TAP	___ 2" TAP
___ # OF FEET OF STORM SEWER	___ 1 1/2" METER	___ 2" METER
___ # OF FEET OF WATER SERVICE	___ OTHER TAP (SIZE)	___ OTHER METER (SIZE)
<b>WILL WORK BE DONE ON CITY PROPERTY?</b>	___ <b>YES</b>	___ <b>No</b>

**OTHER WORK:** \_\_\_\_\_

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*Signature of Property Owner:* \_\_\_\_\_

*Signature of Owner's Authorized Designee (must have Designee Form attached):* \_\_\_\_\_

*Printed Name:* \_\_\_\_\_ *Contact Phone Number:* \_\_\_\_\_

**FOR OFFICE USE ONLY:**

<b>PLUMBING PERMIT FEE:</b>	\$ _____	<b>SANITARY SEWER FEE:</b>	\$ _____
<b>TAP FEE:</b>	\$ _____	<b>STORM SEWER FEE:</b>	\$ _____
<b>WATER SERVICE INSPECTION FEE:</b>	\$ _____	<b>METER FEE:</b>	\$ _____
<b>STREET OPENING FEE:</b>	\$ _____	<b>STREET OPENING BOND</b>	\$ _____
<b>SWIMMING POOL PIPING FEE:</b>	\$ _____	<b>WATER PLAN INV. FEE:</b>	\$ _____
<b>IRRIGATION SYSTEM:</b>	\$ _____	<b>RECORDING FEE FOR ROW:</b>	\$ _____
<b>SANITARY SEWER CONN. FEE:</b>	\$ _____	<b>STOP WORK ORDER:</b>	\$ _____
<b>TOTAL FEES: \$ _____</b>			



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ROOFING PERMIT APPLICATION  
 #:  
 \_\_\_\_\_  
 DATE: \_\_\_\_\_

*For Roofing Permit*

<b>PROJECT ADDRESS:</b>	
<b>PROPERTY OWNER:</b>	<b>PHONE:</b>
<b>MAILING ADDRESS (IF DIFFERENT THAN ABOVE):</b>	
<b>PROPERTY OWNER'S EMAIL ADDRESS:</b>	
<b>ROOFING CONTRACTOR:</b>	
<b>MAILING ADDRESS:</b>	
<b>PHONE:</b>	<b>FAX:</b>
<b>STATE OF ILLINOIS ROOFING LICENSE NUMBER:</b>	

**AREAS PROPOSED FOR ROOFING WORK:**

_____ Single Family Dwelling	_____ Duplex	_____ Commercial Building
_____ Multi Family Dwelling	_____ Addition Only	_____ Detached Structure
_____ Other (Describe):		

**DESCRIPTION OF WORK:**

_____ Complete Tear off and Reroof of Existing Building
_____ Reroof over existing roofing materials (2 total layers permitted by Code)
_____ Number of Squares of Roofing Material to be Applied
_____ Type of Material Proposed
\$_____ is the fair market value of the project including all materials, trades, architectural and engineering fees.

As Property Owner, I hereby agree and acknowledge that all work must be done in accordance with Codes adopted by The City of Lake Forest Code and must be consistent with the approved plans. As Owner, I declare that all information submitted in support of the requested permit is accurate. Falsification of any information will result in penalties as provided for in the Code. By signing this form, owner assumes responsibility for the accuracy of the information provided by the contractor.

Signature of Property Owner: \_\_\_\_\_

Signature of Owner's Authorized Designee (must have Designee Form attached): \_\_\_\_\_

Printed Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

<b>BUILDING PERMIT FEE:</b>	\$ _____	<b>OTHER:</b>	\$ _____
<b>STOP WORK ORDER:</b>	\$ _____	<b>TOTAL FEES: \$</b> _____	

**LAKE FOREST CONSTRUCTION STANDARD REV. 5/08**

**6.02 WAIVER FOR SITE GRADING PERMIT**

The City of Lake Forest  
Application for Waiver of the Site Grading Permit

Application is hereby made for a waiver of a site grading permit at the following described property:

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

**PROJECT DESCRIPTION** \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_

**CONTRACTOR'S PHONE:** \_\_\_\_\_

**Conditions:**

A waiver of the Grading Permit **may be** approved by the City Surveyor and Engineer only on property previously improved with the principal use or structure; where the project consist only of minor additions to existing dwellings or structures, the construction of accessory buildings, tennis courts, swimming pools, or minor landscaping.

The waiver request shall include:

1. **Address or legal description** of the property.
2. **Description of the project.**
3. **Site plan of the project** including the dimensions(s) from the project to the nearest Lot Line(s), provisions for roof drainage (location and direction of discharge), and proposed grading limits.
4. **A statement signed by the property owner** agreeing to the following:

*The applicant hereby certifies that he is the owner of the property described above, and certifies that to the best of his knowledge, the above described project will not disturb existing topography or will not create adverse drainage problems on adjacent property. The applicant further agrees to assume all responsibility for any drainage problems that may be caused directly or indirectly by any action involving the above described project and further absolves The City of Lake Forest of any responsibility for problems or actions that may result from the granting of the waiver of the Site Grading Permit requirements.*

Signed \_\_\_\_\_ Date: \_\_\_\_\_  
Property Owner

\_\_\_\_\_  
Printed Name of Signature Above Telephone Number

Waiver Granted \_\_\_\_\_ Date: \_\_\_\_\_  
City Surveyor and Engineer