



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

**WINDOWS, DOORS AND/OR SIDING (OR OTHER EXTERIOR MATERIAL) PERMIT REQUIREMENTS**

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

**RESIDENTIAL BUILDING PERMIT APPLICATION.**

**HOMEOWNER'S ASSOCIATION APPROVAL.** Required if your subdivision has an active homeowner's association.

*If no changes are proposed:*

**2 COPIES OF A DETAILED DESCRIPTION OF THE WORK.** This can be in the form of a contract for the proposed work and/or manufacturer's spec sheet.

*If changes ARE proposed:*

**2 COPIES OF A DETAILED DESCRIPTION OF THE WORK.** This can be in the form of a contract for the proposed work, describing the materials and details proposed and/or manufacturer's spec sheet. In addition, supply photographs of the existing elevations that will be affected by the proposed work.



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**EXTERIOR MATERIAL 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>CONTRACTOR:</b>	
<b>MAILING ADDRESS:</b>	
<b>PHONE:</b>	<b>FAX:</b>
<b>EMAIL:</b>	

**PROPOSED EXTERIOR WORK:**

**Windows:** Are there changes proposed (size, material, etc.)? \_\_\_\_\_  
 If so, please describe: \_\_\_\_\_  
 Existing Material: \_\_\_\_\_  
 Describe grille pattern and placement- interior, exterior, removable, etc.?  
 \_\_\_\_\_

**Siding/Trim:** Is there a material change proposed? \_\_\_\_\_  
 If so, please describe: \_\_\_\_\_  
 Existing Material: \_\_\_\_\_  
 Is there an active Homeowner's Association? \_\_\_\_\_  
 \$\_\_\_\_\_ 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> _____	