



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

ELECTRIC PERMIT APPLICATION
 #: _____
 DATE: _____

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

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

ELECTRIC PERMIT BASE FEE:	\$ _____	PER UNIT CHARGE:	\$ _____
ELECTRIC SERVICE FEE:	\$ _____	MOTORS:	\$ _____
TOTAL FEES: \$ _____			