



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

### HVAC PERMIT REQUIREMENTS

*The following is required for a complete permit submittal for Furnace or AC units:*

- HVAC PERMIT APPLICATION.** If the proposed unit is new, an Electric Permit is also required.

*The following is required ONLY if AC units are proposed for installation or replacement.*

- 2 COPIES OF THE CURRENT, STAMPED PLAT OF SURVEY.** Show the location of all existing structures, property lines, easements, the existing and proposed AC units and the distance from the property line.

*The following is required for a complete permit submittal for Geothermal work:*

- HVAC PERMIT APPLICATION.**
- 3 COPIES OF THE CURRENT, STAMPED PLAT OF SURVEY.** Show the location of all existing structures, property lines, easements, and the proposed geothermal fields.
- 2 COPIES OF THE GEOTHERMAL SCHEMATIC DIAGRAM.**
- A COPY OF THE LAKE COUNTY HEALTH DEPARTMENT APPROVAL FOR THE GEOTHERMAL SYSTEM.**

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

- HVAC CONTRACTOR'S LICENSE.** This license may NOT be a business license.
- ELECTRIC CONTRACTOR'S LICENSE.** Only if electric work is proposed.



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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> _____	

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: \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
<b>HVAC PERMIT FEE:</b> \$ _____	<b>STOP WORK ORDER:</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>			