



800 Field Drive • Lake Forest, IL 60045
Phone 847.234.2600 x2 • Fax 847.615.4383
www.cityoflakeforest.com

Single Family Dwelling Demolition Checklist

Community Development Department

Notice to Building Permit Applicants

All applicants are encouraged to submit permit applications and construction documents online via the City's web portal at www.bsaonline.com. City Staff is available to assist you in the registration and application process.

Submitting applications and construction documents digitally will allow the City to serve our customers more efficiently. Design professionals can provide digital plans for submittal, if necessary, City Staff will assist in obtaining digital plans from design professionals. For smaller projects, plans printed on 8½ x 11 or 11 x 17, staff is available to scan documents as necessary to convert them to a digital format.

City staff reviews all plans electronically. The final approved construction plans and documents will be made available on the City's web portal. Or, upon request, a copy can be emailed to the property owner or applicant. Property owners are responsible for providing a copy of the approved plans and documents to others who may need them. Upon request, the City will print a copy of the approved plans in an 11x17 format.

To expedite reviews, please submit all of the following information:

- | |
|---|
| <input type="checkbox"/> BUILDING PERMIT APPLICATION AND GRADING WAIVER. |
| <input type="checkbox"/> PLAT OF SURVEY. Please indicate the following information on the plat: <ul style="list-style-type: none">• Scope of demolition• The locations of the sanitary, storm and water services, along with the points of disconnection of each service• Note the site restoration measures will be taken on the property |
| <input type="checkbox"/> ONE COPY OF A REPORT DETERMINING IF THERE IS ASBESTOS IN THE RESIDENCE. If there is asbestos that requires remediation, staff will give further instruction when the remediation shall occur. |
| <input type="checkbox"/> TREE REMOVAL PERMIT APPLICATION. For any tree removal work is proposed with this project. |

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

- | |
|---|
| <input type="checkbox"/> PLUMBER'S STATE OF ILLINOIS LICENSE, LAKE FOREST PLUMBER'S BOND AND A CERTIFICATE OF INSURANCE (listing the City of Lake Forest as additional insured). |
| <input type="checkbox"/> PLUMBER'S LETTER OF INTENT. This letter must be original. |
| <input type="checkbox"/> LETTER FROM COMED AND THE GAS COMPANY. Confirming the termination of service. |



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FOR OFFICE USE ONLY
Permit # _____

Building Permit Application

Community Development Department

PROJECT ADDRESS *(Please print)*

OWNER INFORMATION *(Please print)*

Owner(s) of Record _____

Address _____

City / State _____ Zip Code _____

Phone Number _____ Email Address _____

BUILDING TYPE *(Please check applicable box)*

1 – 2 Family Dwelling Multi Family Commercial Bldg. Sq. Footage _____

SCOPE OF WORK *(Please check all that apply)*

- | | | |
|--|--|--|
| <input type="checkbox"/> New Construction
LOT # _____
SUB. _____ | <input type="checkbox"/> Elevator | <input type="checkbox"/> Sanitary Sewer |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Exterior Lighting | <input type="checkbox"/> Shed/Accessory Structure |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Fence/Screen/Wall/Pillar | <input type="checkbox"/> Sign/Temporary Sign |
| <input type="checkbox"/> Chimney/Tuckpointing | <input type="checkbox"/> Garage | <input type="checkbox"/> Solar Panels |
| <input type="checkbox"/> Contractor Change | <input type="checkbox"/> Gas Piping | <input type="checkbox"/> Storage Tank Removal |
| <input type="checkbox"/> Curb Crossing | <input type="checkbox"/> Generator | <input type="checkbox"/> Storm Sewer |
| <input type="checkbox"/> Deck/Patio/Stoop | <input type="checkbox"/> HVAC | <input type="checkbox"/> Street Obstruction |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Lawn Irrigation System | <input type="checkbox"/> Water Service |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Water Tap/Water Meter |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Pool/Hot Tub/Spa | <input type="checkbox"/> Window/Doors |
| | <input type="checkbox"/> Revision to Approved Permit/Plans | <input type="checkbox"/> Siding/Exterior Materials |
| | <input type="checkbox"/> Roof | <input type="checkbox"/> Other _____ |

Does the property have a Homeowner or Condominium Association? YES NO

Enter the fair market value of the project including all materials, labor and professional fees \$ _____

SIGNATURE OF PROPERTY OWNER

As Property Owner, I hereby agree and acknowledge that all work must be completed in accordance with applicable Codes, regulations and the approved plans. I have reviewed all documents submitted in support of the permit application and affirm that they are complete and accurate to the best of my knowledge. I acknowledge that falsification of information submitted may result in voiding of the permit and fines and penalties as provided for in The City of Lake Forest Code.

Signature of Property Owner _____

Signature of Owner's Authorized Designee (must have Designee Form attached) _____

Printed Name _____ Contact Phone Number _____



PLEASE PROVIDE A DETAILED DESCRIPTION OF PROPOSED PROJECT

Electrical Project Information

Existing Service Overhead Underground AMPS _____
 Proposed Service Overhead Underground AMPS _____
 Total Quantities of Outlets _____ Fixtures _____ Switches _____

HVAC/Mechanical Project Information

Air Conditioner New Unit Replacement of Existing No. of Units _____
 Furnace New Unit Replacement of Existing No. of Units _____
 Rooftop Unit New Unit Replacement of Existing No. of Units _____
 Unit Wall Heater New Unit Replacement of Existing No. of Units _____
 Duct Work Other Work _____

Plumbing Project Information

Total No. of New/Replaced Plumbing Fixtures _____ Gas Piping
 Total No. of Lineal Feet of Sanitary _____ Storm _____ Water _____
 1 1/2" Tap 1 1/2" Meter 2" Tap 2" Meter
 Size of Other Tap _____ Size of Other Meter _____
 Total No. of Irrigation Heads _____ RPZ Work in City Right of Way
 Describe Emergency Repair Work _____

Roofing Project Information

Tear-off and Reroof Reroof over existing roof (2 total layers permitted by Code)
 Is any hot work (torching) proposed? Yes No
 Number of Squares of Roofing Material Applied _____
 Existing Material _____ Proposed Material _____

Fence / Wall / Pillar Project Information

New Fence Replacement of Existing Fence Electric gate
 Fence Length _____ Fence Height _____ Material Type _____
 Wall Length _____ Wall Height _____ Material Type _____
 Pillar Quantity _____ Pillar Height _____ Material Type _____

Windows / Doors

Existing Window Material _____ Proposed Window Material _____
 Total No. of Window(s) / Door(s) _____ Size/Material/Other Changes? Yes No
 Please indicate cladding type, grille pattern and type (i.e. removable, simulated [recommended], etc.)

Siding / Exterior Materials

Existing Siding Material _____ Proposed Siding Material _____
 Size/Material/Other Changes? Yes No

Please describe any changes in the **Description of Project** section at top of page



GENERAL CONTRACTOR

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

ELECTRICAL CONTRACTOR

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

LICENSE #

ISSUED BY

HVAC / MECHANICAL CONTRACTOR

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

LICENSE #

ISSUED BY

PLUMBING CONTRACTOR

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

LICENSE # O55 -

ISSUED BY STATE OF ILLINOIS

ROOFING CONTRACTOR

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

LICENSE #

ISSUED BY STATE OF ILLINOIS

ARCHITECT

NAME / COMPANY NAME

COMPANY ADDRESS

Suite/Apt #

CITY

STATE

ZIP

CONTACT PHONE

EMAIL

LAKE FOREST CONSTRUCTION STANDARD REV. 1/11

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: _____
Engineering Section



**THE CITY OF LAKE FOREST
DEMOLITION TAX REBATE -- STATEMENT OF INTENT**

IDENTIFY THE PROPERTY

Property Owner: _____

Property Address: _____

PIN Number(s) of Property (required if #1 below is checked) _____

City of Lake Forest Demolition Permit Number: _____

CHECK OFF THE APPROPRIATE STATEMENT AND ATTACH ANY AND ALL NECESSARY INFORMATION AS PROVIDED BELOW:

_____ 1. Applicant has been the record title or beneficial interest owner and occupant of the property for three years prior to the issuance of a demolition permit ("Pre-Permit Period"), and Applicant intends to remain owner and occupant for three years following the date a certificate of occupancy for a new single-family home on such property is issued ("Post-Permit Period"). For Applicant to obtain a rebate under this section, Applicant must:

- a. Pay the demolition tax at the time of issuance of a demolition permit;
- b. Complete this Statement of Intent for Rebate at the time of paying the demolition tax;
- c. Attach title documents establishing Applicant's ownership and occupancy during the Pre-Permit Period; and
- d. Following the Post-Permit Period but no later than 48 months after the issuance of a certificate of occupancy for the new single-family home on the property, (i) deliver title documents establishing Applicant's ownership and occupancy of the property for the entire Post-Permit Period, (ii) deliver a completed "Request for Demolition Tax Rebate" form, which request shall include a copy of this Statement of Intent as filed at the time of demolition, and (iii) evidence of payment of the demolition tax (e.g., cancelled check, City receipt).

Applicant shall attach all necessary information to be entitled to a rebate. Verification of ownership and occupancy may include a copy of the recorded deed for the property, a driver's license or voter registration card for the periods in question, or other documentation that the City Manager or the Manager's designee may determine is satisfactory evidence of ownership or occupancy.

_____ 2. Applicant does not meet the "Pre-Permit Period" requirements and/or does not intend to meet the "Post-Permit Period" requirements and is not eligible for a rebate

FAILURE TO FILE FOR A DEMOLITION TAX REBATE WITHIN 48 MONTHS AFTER THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY SHALL BE DEEMED A WAIVER OF ALL CLAIMS FOR SUCH REBATE.

Date: _____

Signature of Property Owner

For office use only	<u>ROUTE COPY TO FINANCE</u>
_____ 50% Acct. # 311-0000-227-59-00	Hold for possible Post-Permit Period Rebate (#1 above)
50% Acct. # 248-0000-227-59-00	
_____ 50% Acct.# 311-0000-318-07-00	Process as revenue (#2 above)
50% Acct.# 248-0000-318-07-00	



THE CITY OF LAKE FOREST
DEMOLITION TAX RECEIPT

Property Owner: _____

Property Address: _____

City of Lake Forest Demolition Permit Number: _____

Number of Dwelling Units in Building to Be Demolished: _____

Amount of Demotion Tax Due _____

NOTE:

- A. Any persons who believe that they are exempt from the Demolition Tax pursuant to either Section 39-76(a)(1) or Section 39-76(a)(3) of the City Code may file an "Application for Exemption from Demolition Tax" form, which is available from the City.
- B. Any persons who believe that they may be entitled to a rebate of the Demolition Tax pursuant to Section 39-76(a)(2) of the City Code (which applies only to owner-occupied single-family home residents) shall be required to file a "Demolition Tax Rebate – Statement of Intent" form, at the time of payment of the Demolition Tax. The form is available from the City.

Failure to file an exemption or rebate form at the time that the Demolition Tax is due shall preclude the taxpayer from seeking an exemption or rebate at a future date.

<p><u>For office use only</u></p> <p>Form of Payment:</p> <p>___ Certified or Cashier's Check -- Bank & Check # _____</p> <p>___ Wire Transfer -- Wire Acct #: _____</p> <p>Staff Processing Payment Receipt: _____</p> <p>Date: _____</p> <p>NOTE: Completed copy to be returned to Applicant as receipt of payment of Demolition Tax.</p>
