

Village of New Lenox
Community Development
1 Veterans Parkway
New Lenox, IL 60451
815.462.6490
815.462.6469(fax)
www.newlenox.net

the Village of New Lenox
"Home of Proud Americans"



New Construction Application – Commercial/Industrial
PERMIT #: _____

APPLICANT INFORMATION

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____

SITE/BUSINESS INFORMATION

BUSINESS NAME: _____
PROPERTY ADDRESS: _____
PROPERTY INDEX NUMBER (P.I.N.): _____
SUBDIVISION: _____ LOT # _____
BUSINESS REGISTRATION #: _____

BUILDING OWNER INFORMATION

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____

BUILDING INFORMATION

BUILDING USE: _____
ESTIMATED VALUE OF CONSTRUCTION: _____
DESCRIPTION OF WORK: _____

I HEREBY CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO CONFORM TO ALL GOVERNING INFORMATION AND REGULATIONS SET FORTH BY THE NEW LENOX VILLAGE BOARD.

SIGNATURE OF APPLICANT: _____ DATE: _____

CONTRACTOR LIST

| TYPE OF CONTRACTOR | NAME OF CONTRACTOR | REGISTRATION NUMBER |
|-----------------------|--------------------|---------------------|
| ARCHITECT | | |
| GENERAL | | |
| FOUNDATION | | |
| EXCAVATOR | | |
| CARPENTER | | |
| MASON | | |
| PLUMBER | | |
| ELECTRICIAN | | |
| ROOFER | | |
| HVAC | | |
| DRYWALL | | |
| SEWER/WATER | | |
| SIDING/SOFFIT/GUTTERS | | |
| FLOOR COVERINGS | | |
| PAINTER | | |
| INSULATOR | | |
| WATERPROOFER | | |
| ACCOUSTICAL | | |
| GLAZING | | |
| PAVER | | |
| LANDSCAPER | | |
| SPRINKLER SYSTEM | | |
| OTHER | | |

UNDERGROUND SPRINKLER SYSTEMS: A COPY OF THE CERTIFICATION FOR THE BACKFLOW PREVENTER IS TO BE SUBMITTED TO THE COMMUNITY DEVELOPMENT DEPARTMENT UPON COMPLETION OF THE SYSTEM.

PLEASE NOTE THAT THE BUILDING PERMIT CANNOT BE ISSUED UNTIL ALL CONTRACTORS FOR THIS PROJECT ARE REGISTERED WITH THE VILLAGE.

BUILDING CHECKLIST – COMMERCIAL / INDUSTRIAL

EACH APPLICANT IS RESPONSIBLE FOR SUBMITTING THE FOLLOWING APPLICABLE ITEMS. DRAWINGS SHALL BE ARCHITECTURAL OR ENGINEERING DRAWINGS WITH DIMENSIONS APPROPRIATELY SHOWN. **APPLICATION FOR A BUILDING PERMIT SHALL NOT BE COMPLETE UNTIL ALL APPLICABLE DETAILS ON THE CHECKLIST HAVE BEEN SATISFIED.**

| | <u>APPLICANT'S INITIALS</u> | <u>VILLAGE INITIALS</u> |
|---|------------------------------------|--------------------------------|
| 1. THREE SETS OF DRAWINGS | _____ | _____ |
| 2. SITE PLAN DETAIL SHEET (2 COPIES) | _____ | _____ |
| 3. PARKING PLAN DETAIL SHEET | _____ | _____ |
| 4. FOUNDATION DETAIL SHEET | _____ | _____ |
| 5. FLOOR PLANS | _____ | _____ |
| 6. WALL CONSTRUCTION DETAIL SHEET | _____ | _____ |
| 7. APPLICABLE SEATING CAPACITY SHEET | _____ | _____ |
| 8. FLOOR CONSTRUCTION DETAIL SHEET | _____ | _____ |
| 9. ROOF/CEILING CONSTRUCTION DETAIL SHEET | _____ | _____ |
| 10. CHIMNEY/FIREPLACE AND CHASE DETAIL | _____ | _____ |
| 11. MECHANICAL DETAIL SHEET | _____ | _____ |
| 12. PLUMBING DETAIL SHEET | _____ | _____ |
| 13. ELECTRICAL DETAIL SHEET | _____ | _____ |
| 14. ACCESSIBILITY DETAIL SHEET | _____ | _____ |
| 15. EXTERIOR SIGN DETAIL SHEET (A SEPARATE SIGN PERMIT IS REQUIRED FOR EACH PROPOSED SIGN) | _____ | _____ |
| 16. USE GROUP CLASSIFICATION_____. | _____ | _____ |
| 17. TYPE OF CONSTRUCTION_____. | _____ | _____ |
| 18. ARCHITECTURAL SEAL | _____ | _____ |
| 19. DRAINAGE CERTIFICATE, COMPLETED | _____ | _____ |
| 20. EROSION CONTROL PERMIT, COMPLETED | _____ | _____ |
| 21. AUTHORIZATION FOR THIRD PARTY PLAN REVIEW | _____ | _____ |
| 22. LANDSCAPE PLAN | _____ | _____ |
| 23. CONSTRUCTION TRAILER PERMIT (IF APPLICABLE) (A SEPARATE TEMPORARY USE PERMIT APPLICATION MUST BE SUBMITTED FOR EACH TRADE REQUIRING A CONSTRUCTION TRAILER) | _____ | _____ |
| 24. ENERGY CODE CALCULATIONS | _____ | _____ |

PLAN REVIEW NON-REFUNDABLE DEPOSIT

I HAVE SUBMITTED BUILDING PLANS TO THE VILLAGE OF NEW LENOX COMMUNITY DEVELOPMENT DEPARTMENT FOR REVIEW. I AM AWARE THAT AS THE APPLICANT FOR THE BUILDING PERMIT, I AM RESPONSIBLE FOR ALL COSTS INCURRED FOR THE REVIEW OF THE BUILDING PLANS IN ACCORDANCE WITH THE FEE SCHEDULE, EVEN IN THE EVENT THE BUILDING PERMIT IS NOT ISSUED OR THE PROJECT DOES NOT PROCEED FOR ANY REASON.

I UNDERSTAND THAT THE PLAN REVIEW DEPOSIT SHALL BE DUE AND PAYABLE AT THE TIME OF APPLICATION TO THE COMMUNITY DEVELOPMENT DEPARTMENT. **ALL PLAN REVIEW DEPOSITS ARE NON-REFUNDABLE.**

PROJECT NAME: _____

PROJECT ADDRESS: _____

ESTIMATED VALUE OF PROJECT: _____

NAME OF APPLICANT: _____

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE #: _____

EMAIL ADDRESS: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

_____ **VILLAGE USE ONLY** _____

PLAN REVIEW DEPOSIT AMOUNT: \$ _____

FORM OF PAYMENT: _____

DATE PAID: _____

DRAINAGE CERTIFICATE

The undersigned, _____, hereby affirms and acknowledges as follows, to wit:

1. That I am the applicant, or the authorized agent for the applicant, with the Village of New Lenox, Illinois.
2. That certain drainage requirements must be met with regards to the subject lot in order to comply with the comprehensive drainage plan.
3. That I have been given the drainage plan for the subject lot.
4. That I have reviewed said drainage plan and that I have been given the opportunity to seek professional review of same.
5. That, further, I understand and agree to comply with the drainage plan and that I will not alter that plan or interfere with the comprehensive drainage plan.

I hereby declare that the above and attached information is correct and agree to do or allow to be done only such activity as herewith is set forth above. I have read the above and agree to comply with the same.

Signature

Date

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20__

(NOTARY PUBLIC)

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Site Development Permit

TYPE OF DEVELOPMENT (CHECK ONE):

SUBDIVISION NAME _____
 COMMERCIAL/INDUSTRIAL SINGLE PARCEL DEVELOPMENT
 RESIDENTIAL UNIT CONSTRUCTION
 OTHER _____

SITE LOCATION:

ADDRESS: _____
LOT #: _____ SUBDIVISION: _____

APPLICANT INFORMATION:

APPLICANT: _____
CONTACT PERSON: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____ EMAIL ADDRESS: _____

OWNER INFORMATION:

OWNER: _____
CONTACT PERSON: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____ EMAIL ADDRESS: _____

DEVELOPER INFORMATION:

DEVELOPER: _____
CONTACT PERSON: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____ EMAIL ADDRESS: _____

ENGINEER INFORMATION:

ENGINEER: _____
CONTACT PERSON: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE #: _____ EMAIL ADDRESS: _____

DESCRIPTION OF PROPOSED WORK: _____

MEASURES PROPOSED TO CONTROL EROSION AND SEDIMENTATION: _____

NPDES PERMIT # ILR: _____
CONSTRUCTION START DATE: _____ FINAL COMPLETION DATE: _____

If reference here is made to specific construction plans and specifications, said plans and specifications are hereby made a part of this application and the certification hereon is construed to include said plans and specifications.

In consideration of this application and the issuance of this permit:

1. I/we will conform to the regulations set forth in the Erosion and Sedimentation Control Ordinance (Chapter 38, Article II) of the Municipal Code of the Village of New Lenox.
2. I/we also agree that all work performed under this permit will be in accordance with the plans that accompany this application, except for such changes as may be authorized by the Village's Civil Engineer.
3. I/we also agree to take whatever steps necessary to attain the objectives of said Erosion and Sedimentation Control Ordinance as required by the Village of New Lenox.
4. I/we also agree to contain any and all impacts resulting from erosion or sedimentation to the confines of the property described above.

APPLICANT'S SIGNATURE: _____ DATE: _____

SUBSCRIBED AND SWORN BEFORE ME

THIS _____ DAY OF _____, 20_____.

(NOTARY PUBLIC)

FOR OFFICE USE ONLY

APPROVED BY: _____

TITLE: _____

DATE: _____