

VILLAGE OF LAKE BARRINGTON

23860 N. OLD BARRINGTON ROAD • LAKE BARRINGTON, IL 60010

TEL (847) 381-6010, ext 105 • FAX (847) 381-8557

www.lakebarrington.org • EMAIL TO: building@lakebarrington.org

Date of Application _____

BUILDING PERMIT APPLICATION

OWNER

Job Address
Name
Address
City/Zip
Phone Email:

Lot	Block	Unit
Sub'd.		
Tax No.		
Zoning		

CONTRACTOR

Name
Address
City
Phone Email:

NOTICE	
A certificate of occupancy and compliance must be issued prior to occupancy of all new structures, additions, and for change of use.	
CL#	Exp:

SUB-CONTRACTORS (see page 2 for additional list)

PLUMBER:	Address:	Phone:	CL#	Exp
ELECTRICIAN:	Address:	Phone:	CL#	Exp
HVAC:	Address:	Phone:	CL#	Exp

Description of Work:

Valuation: (COST)

Square Footage:

	Fees		Fees
Plan Review Fees		Site Development (Engineering)	
Building/Demolition/ Inspections		Occupancy	
Plumbing		Other	
Electrical		Performance bond (refundable)	
Heating/Air Conditioning		Road bond (refundable)	
Deck/Balcony/Patio			
		BALANCE DUE to VILLAGE:	

CONDITIONS OF PERMIT

<p><i>In consideration of this application and attached forms being made a part thereof and the issuance of permit, I will conform to the regulations set forth in the Village of Lake Barrington codes and ordinances.</i></p> <p><i>I also agree that all work performed under said permit will be in accordance with the plans and specifications which accompany this application, except for such changes as may be authorized or required by the Building Official.</i></p> <p style="text-align: center;">PERMIT VALID FOR _____ MONTHS FROM DATE OF ISSUE</p> <p>Signature of Owner or Authorized Agent:</p> <p>or</p> <p>Signature of Licensed Contractor:</p>	<p>Bond Fees \$ _____ Permit Fees \$ _____</p> <p>Water Tap-on \$ _____ Impact fees \$ _____</p> <p>Deposit amount \$ _____</p> <p>Date Paid: _____</p> <p>CC/CK# _____</p> <p>Paid by: _____</p>
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Permit fees Paid Date: _____

Check or Credit card #: _____

Amount Paid \$ _____

Paid by: Owner: _____

General Contractor: _____

Other: _____

A permit for the above work is hereby authorized

Address of Project: _____

SUB-CONTRACTORS:

Carpentry:	Address:	Phone:	CL# Exp:
Drywall:	Address:	Phone:	CL# Exp:
Concrete:	Address:	Phone:	CL# Exp:

Asphalt:	Address:	Phone:	CL# Exp:
Fire sprinkler:	Address:	Phone:	CL# Exp:
Fire alarm:	Address:	Phone:	CL# Exp:

Masonry:	Address:	Phone:	CL# Exp:
Septic:	Address:	Phone:	CL# Exp:
Well:	Address:	Phone:	CL# Exp:

Excavator:	Address:	Phone:	CL# Exp:
Underground utilities:	Address:	Phone:	CL# Exp:
Hardscapes:	Address:	Phone:	CL# Exp:

OTHERS SUB-CONTRACTORS:

Fence:	Address:	Phone:	CL# Exp:
Pool:	Address:	Phone:	CL# Exp:
Roofing:	Address:	Phone:	CL# Exp:

Signs:	Address:	Phone:	CL# Exp:
Other:	Address:	Phone:	CL# Exp:
Other:	Address:	Phone:	CL# Exp: