VILLAGE OF BUFFALO GROVE

Signature of Owner or Agent: _



Fifty Raupp Blvd | Buffalo Grove, IL 60089-2139 | Phone 847-459-2530 | Fax 847-777-6046 www.vbg.org | bldgdept@vbg.org

BUILDING PERMIT APPLICATION

** PLEASE COMPLETE BOTH PAGES **

ADDRESS:		Cost of Construction: \$		
Type of property: [] Residential []	Commercial			
	S Tenant (required): City	, State, ZIP:		
Phone:	Ema	ail:		
Applicant Name (if not property Address:Phone:	/ owner): City Ema	Company: , State, ZIP:		
DESCRIPTION OF WOR	K:			
TYPE OF IMPROVEMENT: [] Addition [] Air Conditioner [] Basement Remodel [] Burglar Alarm [] Deck [] Demolition [] Driveway/Apron** [] Electrical [] Elevator (New/Mod)	(** indicates additional application; please [] Fence** [] Fire Alarm [] Fire Damage Repair [] Fire Suppression [] Foundation Repair [] Furnace [] Garage [] Generator [] Lawn Sprinkler	e see project guidelines for requirements [] Mechanical [] New Construction [] Patio/Walks/Landing [] Parking Lot [] Plumbing [] Remodel [] Roof** [] Sewer Repair** [] Shed	[] Sign - Permanent [] Sign - Temporary [] Swimming Pool [] Trailer [] Tenant Buildout [] Tent [] Water Heater [] Window/Glass Door** [] Other	
General: Alarm: Asphalt:	in the Village must be listed on the permit. Al Address	P	hone	
Cement: Electrical: Radon: Excavator:				
Plumber: Roofing: Sign: Sprinkler:				
In consideration of this application set forth in the Buffalo Grove Munic which accompany this application. Building Official or not, shall permit of this Village relating thereto. The	and attached forms being made a part the cipal Code and all work performed under s No error or omission in either the plans or or relieve the applicant from constructing applicant agrees to pay all Plan Review For the intent thereof declares that the statem	reof and the issuance of permit, I will con aid permit will be in accordance with the application, whether said plans or applic the work in any other manner than that p ees whether they receive a permit or not	approved plans and specification cation have been approved by the provided for in the Municipal Code. The applicant having read this	

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Date:

PLEASE COMPLETE ALL APPLICABLE INFORMATION

New Construction / Interior Rer Improvement (area of remodel) sq f				
Use Group:	Zoning:	Type of Constructio		
Dimensions of Bldg:	Stories: Front:			
No. of sq. ft. per floor:	Total sq ft of bldg.:			
No. of bedrooms:	Basement: Full / Crawl / Sl	lab Garage: Attached /	Detached	
Mechanical				
Type of Heat:	BTU:	High Efficiency? Y / N		
A/C size:ton	New location? Y / N	Other:		
Electrical				
No. of 15amp Circuits:	No. of 20amp Circuits:	No. of 30amp Circu	ts:	
No. of 40/50/60amp Circuits:				
Service Size:	New or Existing:		Size:	
No. of Motors:	No. over ¾ HP:			
Low Voltage System Type:		Burglar Alarm Type: Wired / \	Vireless	
Plumbing				
No. of Fixtures: No. of			np Pumps:	
No. of Water Heaters: Type: _				
No. of Backflow Prevention Devices:	: New /	Replacement No. of Lav	vn Sprinkler Heads:	
Accessory Structure – Shed / De		er / Detached Garage / Gazeb Height:		
Driveway / Apron				
			Apron Material: Concrete / Brick	
Width of driveway at sidewalk:	Width of apron a	at sidewalk:	Width of apron at curb:	
Patio / Sidewalk				
Dimensions: Total s	square feet:	Material: Concrete / Brick Pav	rers	
Fence				
	r foot:	Stude		
Height: Linear	r feet:	Style:		
Sewer Repair				
Cleanout? Y / N Distan	nce from foundation: ft	Work in R.O.W.? Y / N (If yes, \$	1000 ROW bond required)	
Sign				
	nsions:	Sq Ft: Illuminate	ed? Y / N	
Temporary Dates:				
Swimming Pool Type: Hot Tub / Spa / Above Ground	d / In Ground		Village Time Stamp:	
Fire Alarm				
	of Fire Alarm System Devices:	System: Wired / Wirele	ess	
Fire Suppression				
_ = = =	m type:	RPZ: Y / N		
		o. of Fire Sprinkler Heads:		
10.01				
Elevator				
	Power Type:	No. of stories:		

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