

Community Development Department 1200 L.W. Besinger Drive, Room 206 Carpentersville, IL 60110

https://www.cville.org

Phone: (847) 551-3478

Fax: (847) 426-0864

Hours: Mon-Fri 8:30 a.m. – 4:30 p.m.

For more information, visit <a href="https://www.cville.org/permitguide.">https://www.cville.org/permitguide.</a>

## General Residential Building Permit Application

Project Address:					Date:					
Applicant:					Applicant Phone #					
Applicant Email:										
Property Owner:					Owner Phone #:					
Property Owner Address:										
General Contracto	r:				GC Phone #:					
Sqft of project:					Cost of project:					
No error or omission in either the applicant's plans or application, whether said plans or application has been approved by the Village or not, shall permit or relieve the applicant form constructing the work in any other manner other than that provided for in all the ordinances of the Village of Carpentersville relating thereto. The applicant shall submit the work contemplated by this application to the required inspections and shall not allow the occupancy of any space encompassed by the work until a Certificate of Occupancy has been obtained from the Village. The applicant having completed and read this application and fully understanding its requirements declares that the applicant's statements and plans are true to the best of his ability, knowledge and belief. The applicant understands and agrees that any building permit or certificate of occupancy shall not relieve the applicant of compliance with the rights of any third part such as, by way of example only, any easement or covenants or restrictions affecting the applicant's property, compliance with same being the applicant's sole responsibility.  Applicant Signature:  Date:										
Type of work (mark all that apply):										
□ A/C □ Chicken Coop □ Deck □ Demo □ Dumpster	□ Drive	eway tric :e ace	□ Garage Door □ HVAC □ Interior Remodel □ Patio □ Pergola/Gazebo	□ F □ F	Plumbing Pool/Above-Ground Pool/In-Ground Roof Sewer	□ Shed □ Side □ Sidir □ Sola □ Stoo	walk ng r ASES	□ Windows □ Other		
Summary of work	:									
Village Staff Use O.	n/v·									
Minimum Required		ctions:								
□ Site Visit □ Demo Final			Pre-pour Trench		~			sulation ackfill		
Approved By:		Date:		Fee	I	Per	mit #:			

Please fill out all information for trades being used in construction. If a homeowner is completing work, indicate in name field only "Homeowner". Electrician: No electric work being performed: **Electrician Name:** Electrician Phone #: **Electrician Email: Electrician Company Name: Electrician Company Address:** Copy of valid electrician's license attached? YES NO **HVAC:** No HVAC work being performed: Technician Name: Technician's Phone #: Technician's Email: **HVAC Company Name: HVAC Company Address** Plumber: No plumbing work being performed: Plumber's Name: Plumber Phone #: Plumber Email:

## Roofer:

**Plumbing Company Name:** 

Plumbing Company Address:

Copy of valid 055 license and letter of intent, or affidavit attached?

Roofer on record name:				
Roofer's Phone #:	Roofer's	Email:		
	<u> </u>			
Copy of valid roofing license or affidavit attached?	YES		NO	

NO

YES

## Other Trade:

Technician Name:						
Technician's Phone #:	Technician's Email:					