

**KANE COUNTY DEVELOPMENT DEPARTMENT
BUILDING AND COMMUNITY SERVICES DIVISION**
719 BATAVIA AVENUE BUILDING A
GENEVA, ILLINOIS 60134
(630) 232-3485

KANE COUNTY BUILDING AND ZONING PERMIT APPLICATION

Application Date: _____

REQUIRED SUBMITTALS - required at time of application

For Residential Construction:

2012 International Residential Code, as amended

1. **2 complete sets of construction plans**
2. **3 copies of a plat of survey or site plan drawn to scale, with the proposed construction and all existing structures drawn to scale, no larger than 11 x 17 paper size**
3. 1 copy of access / culvert permit
4. Legal description for new single family construction
5. KDOT Impact Fee receipt

NOTE: Electronic submissions do not have a size requirement nor are multiple copied required.

For Non-residential and Multi-family:

2012 International Building Code, as amended

Schedule pre-application meeting with the Building Officer or Permit Coordinator

For Agricultural Exempt Structures:

Refer to handout for Agricultural Exempt Structures
Notarized Agricultural Exempt Structure Form required

In the State of Illinois, Fire Protection Districts have the authority to adopt and enforce ordinances independent from Kane County's adopted building codes and ordinances. It is the owner's responsibility to notify the appropriate fire protection district and comply with any required submittals, inspections and occupancy requirements in addition to those required by Kane County.

PROPERTY INFORMATION

PLEASE PRINT

Parcel/ PIN / Tax Id.

Property Address

(except new construction)

Property Owner Information

Owner: _____

Address: _____

City / St: _____ Zip _____

Phone #: _____

Email: _____

REQUIRED
(from title or tax bill)

City _____ Zip _____

BUILDING PERMIT APPLICATION

Permit Type Requested &/or Use: _____

Private Well?

Public Water Supplier _____

Residential: Subdivision/Lot _____

Private Septic?

Commercial: Project Name _____

Public Sewer _____

COSTS, SQUARE FOOTAGE, UNITS

New Construction Cost _____

Stormwater Permit # _____

Remodeling Cost _____

Well & Septic Permit # _____

Total Estimated Cost _____

Well & Septic Permit #2 _____

New Dwelling Units _____

Access Permit
Issued by _____

New Square Feet
Above Ground _____ <small>(includes garage, decks, porches & stoops)</small>
Basement _____
Crawl Space _____
Total _____

(Continued)

CONTACTS

Primary Contact for Project: Owner Lessee General Contractor

Other _____

GENERAL CONTRACTOR (Required)

_____ Zip _____

Email
Office _____ Mobile _____

Company
Contact
Address
City & State
E-mail
Phone #s

ARCHITECT (Required, if Commercial Project)

_____ Zip _____

Email
Office _____ Mobile _____

ROOFING CONTRACTOR (Required)

_____ Zip _____

Email
Office _____ Mobile _____

Company
Contact
Address
City & State
E-mail
Phone #s
License

PLUMBING CONTRACTOR (Required)

_____ Zip _____

Email
Office _____ Mobile _____

License _____

License _____

Other Contacts such as Lessee, Electrical Contractor, Designer, Structural Engineer, etc. Indicate which in type of contact.

Type of Contact _____

_____ Zip _____

Email
Office _____ Mobile _____

Company
Contact
Address
City & State
E-mail
Phone #s

Type of Contact _____

_____ Zip _____

Email
Office _____ Mobile _____

In consideration of this application and attached forms being made a part thereof, and the issuance of permit, I/we will conform to the regulations set forth on the Kane County Zoning and Building Ordinances. I/We also agree that all work performed under said permit will be in accordance with the building plans and site plan which accompany this application, except for such changes as may be authorized by the Building Officer.

Signature of Owner or Authorized Agent

Printed Name