

**RESIDENTIAL NEW**

One and Two Family Custom Home Dwellings

**City of Aurora**Development Services Department  
Division of Building and Permits  
77 S Broadway  
Aurora, IL 60505

APPLICATION #: \_\_\_\_\_

Total Fees: \_\_\_\_\_

Submittal Date: \_\_\_\_\_

Online Portal: <https://auro-trk.aspgov.com/etrakit/>

Phone: 630.256.3130

Website: [www.aurora-il.org](http://www.aurora-il.org)

County: \_\_\_\_\_

School District: \_\_\_\_\_

Park District: \_\_\_\_\_

Address: \_\_\_\_\_

Subdivision: \_\_\_\_\_

**Owner Information (all fields required)****Additional Contact Info** Applicant  Developer

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

**ACKNOWLEDGEMENT OF APPLICATION ONLY**

This is an application only. Completion of this application does NOT entitle the commencement of construction. I, (the applicant) agree to conform to all applicable laws of the City of Aurora. I also agree that all work performed will be in accordance with the plans and specifications as set forth in the approved permit. I understand that the approval of this application and issuance of a permit does not preclude the need to comply with all applicable laws and ordinances. I agree to hold harmless and indemnify the City of Aurora for any claim against the City as the result of any act of commission or omission by or on behalf of the undersigned, his/her agent, principle, contractor, subcontractor or supplier. I the undersigned am the Owner or a duly contracted representative of the owner of said property. As part of this application process, I affirm that all the information herein is true and correct to the best of my knowledge. I authorize the City of Aurora to make any reasonable inspections of the property as part of the application and permit process.

 Owner Contractor Representative Role: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICATION SUBMITTAL REQUIREMENTS**

- Reference the ["Submittal Requirements, Application Timeframes and Inspection Contacts"](#) handout for quantity of items to submit with completed application
- Proposed Engineering Grading Agreement
- Proposed Plat of Survey for the lot showing site specific home located at this address
- Fox Metro Yellow Card approval specific to this address
- Highway Impact Tax receipt for DuPage and Kane Counties
- Plumber's Letter of Intent specific to this address
- If in need of a TCO (Temporary Certificate of Occupancy) additional fees and grading bond will be required

**DESIGN PROFESSIONAL RESPONSIBLE**

Single-family structures including accessory structures having two thousand five hundred (2,500) gross square feet floor area or more are required to be stamped by a Licensed Illinois Architect or Structural Engineer. Site plans with topography, must be stamped by a Licensed Illinois Engineer.

**LICENSED ARCHITECT / STRUCTURAL ENGINEER****CIVIL ENGINEER / PROFESSIONAL ENGINEER**

Illinois Design Firm Registration #: \_\_\_\_\_

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**APPLICABLE CODES**2014 Illinois Plumbing Code  
2014 National Electrical Code2015 International Residential Code  
2018 International Energy Conservation Code[City of Aurora Ordinances](#)

Application Fee is due at time of submittal.

COST OF WORK: \_\_\_\_\_

**BUILDING INFORMATION**

Type:  Detached  Townhouse  Two Family  
If required, UL Fire Separation Details (1 or 2 Hour) Provided:  Yes  No  N/A  
Fire Separation Distance: \_\_\_\_\_' Is basement a story above grade:  Yes  No  
Foundation:  Slab  Crawlspace  Basement  
Areas: 1<sup>st</sup> Floor: \_\_\_\_\_ sf 2<sup>nd</sup> Floor: \_\_\_\_\_ sf Basement: \_\_\_\_\_ sf Garage: \_\_\_\_\_ sf Deck: \_\_\_\_\_ sf

Number of Bedrooms: \_\_\_\_\_  
Number of Dwelling Units: \_\_\_\_\_  
Number of Stories Above Basement: \_\_\_\_\_  
Garage:  Attached  Detached

**CONTRACTOR INFORMATION AND ASSOCIATED SCOPE OF WORK**

**GENERAL CONTRACTOR INFORMATION**

City of Aurora Registration #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**ROOFING CONTRACTOR INFORMATION**

City of Aurora Registration #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**ELECTRICAL CONTRACTOR INFORMATION**

City of Aurora Registration #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Electrical Service Size: \_\_\_\_\_ amps  
# of Sets of Service Conductors: \_\_\_\_\_ Size: \_\_\_\_\_

**PLUMBING CONTRACTOR INFORMATION**

City of Aurora Registration #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Water Service Size: \_\_\_\_\_ Water Meter Size: \_\_\_\_\_  
Type of Backflow Prevention Device: \_\_\_\_\_  
Number of Plumbing Fixture Units: \_\_\_\_\_ PFUs

**MECHANICAL CONTRACTOR INFORMATION**

City of Aurora Registration #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Type of HVAC:  RTU  Split System  Unit Heaters  
 A/C  Boiler  Exhaust  
# of BTU's: \_\_\_\_\_