

SFHC – SINGLE FAMILY & DUPLEX NEW CUSTOM HOUSING - APPLICATION FORM

FOR OFFICIAL USE ONLY	TOTAL FEE	 <p align="center">DIVISION OF BUILDING & PERMITS 77 S BROADWAY AURORA, ILLINOIS 60505</p>
PERMIT APPLICATION NO	_____	
1 _____	BLDG _____	
_____	PLRV _____	
SUBMITTED _____	C.O. _____	
_____/_____/_____	F.I.F. _____	
NOTIFIED _____	SCH _____	
_____/_____/_____	PRK _____	
ZONING _____	WTR _____	
_____	WEB www.aurora-il.org	
	FAX (630) 256-3139	
	TELEPHONE (630) 256-3130	

LAND / PARCEL INFORMATION

PROPERTY ADDRESS _____

SUBDIVISION _____ **UNIT / PHASE #** _____ **LOT #** _____

COUNTY	<input type="checkbox"/> KANE	<input type="checkbox"/> DuPAGE	TOWNSHIP	11 12 04	TOWNSHIP SECTION #	_____
(CHECK ONE)	<input type="checkbox"/> KENDALL	<input type="checkbox"/> WILL	(CIRCLE ONE)	14 15 07	BLOCK # (if known)	_____
				03 01	LOT# (if known)	_____

PROPERTY OWNER _____ **PHONE # ()** _____

OWNER'S ADDRESS _____ **EMAIL** _____

ZONING / DEMOGRAPHICS INFORMATION

Dwelling Type Detached (SFHC) Townhouse (MSFT)
 TWO FAMILY (DUP) 3&4 FAMILY (QUAD)

Number of Bedrooms in This Unit _____

Number of Dwelling Units in Building _____

Under Grade Improvements Slab Crawlspace Basement

Garage Improvements Attached Detached

Governmental Financing or Grants for Project Yes No

REQUIRED SUBMITTAL ITEMS

(See information sheet attached, page 4 for descriptions)

THREE SETS OF CONSTRUCTION DOCUMENTS

PROPOSED PLATS OF SURVEY WITH

TOPOGRAPHICAL AND SETBACK INFORMATION IS ATTACHED

(below items need to be submitted prior to issuance of permit)

FOX METRO YELLOW CARD / RECEIPT ATTACHED

IF IN DuPAGE or KANE Co. HIGHWAY IMPACT RECEIPT ATTACHED

PLOT PLAN SKETCH w/ SETBACK INFORMATION

STREET _____

TOTAL COST OF IMPROVEMENTS \$ _____

CONTRACTOR REGISTRATION INFORMATION

GENERAL CONTRACTOR (Check primary contact) θ
 CITY OF AURORA
 G.C. REGISTRATION# _____

BUSINESS NAME _____
 CONTACT NAME _____
 ADDRESS _____
 CITY, STATE, ZIP _____

N/A θ PHONE () _____ - _____
 FAX () _____ - _____
 E-MAIL _____

MECHANICAL CONTRACTOR (primary contact) θ
 CITY OF AURORA
 HVAC REGISTRATION # _____

BUSINESS NAME _____
 CONTACT NAME _____
 ADDRESS _____
 CITY, STATE, ZIP _____

N/A θ PHONE () _____ - _____
 FAX () _____ - _____
 E-MAIL _____

ELECTRICAL CONTRACTOR (primary contact) θ
 CITY OF AURORA
 ELECT REGISTRATION # _____

BUSINESS NAME _____
 CONTACT NAME _____
 ADDRESS _____
 CITY, STATE, ZIP _____

N/A θ PHONE () _____ - _____
 FAX () _____ - _____
 E-MAIL _____

ROOFING CONTRACTOR (primary contact) θ
 CITY OF AURORA
 ROOFING REGISTRATION # _____

BUSINESS NAME _____
 CONTACT NAME _____
 ADDRESS _____
 CITY, STATE, ZIP _____

N/A θ PHONE () _____ - _____
 FAX () _____ - _____
 E-MAIL _____

PLUMBING CONTRACTOR (primary contact) θ
 CITY OF AURORA
 PLUMBING REGISTRATION # _____

BUSINESS NAME _____
 CONTACT NAME _____
 ADDRESS _____
 CITY, STATE, ZIP _____

N/A θ PHONE () _____ - _____
 FAX () _____ - _____
 E-MAIL _____

CERTIFICATION

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 obviate 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.

CONTRACTOR _____ **OWNER** _____
(PRINT) (PRINT)

CONTRACTOR _____ **OWNER** _____
(SIGNATURE) (SIGNATURE)

Address _____

Application # _____

BUILDING INFORMATION

NUMBER OF STORIES ABOVE BASEMENT _____ STORIES
IS BASEMENT A STORY ABOVE GRADE YES NO
FIRE SEPARATION DISTANCE _____ FT

UNIT SEPARATION
TWO FAMILY One hour rating - UL test details provided YES N/A
TOWNHOUSE Two hour rating - UL test details provided YES N/A

[Permit Fees are a function of the square footage info below]

BUILDING AREA

SF PRINCIPAL _____ SF
SF ACCESSORY / GARAGE _____ SF
SF BASEMENT / CRAWL _____ SF
SF DECK _____ SF
TOTAL _____ SF

BUILDING COST

OVERALL ACTUAL
COST OF
CONSTRUCTION
TOTAL \$ _____

ELECTRICAL INFORMATION

ELECTRIC SERVICE SIZE _____ AMPS
OF CIRCUITS _____

PLUMBING INFORMATION

DOMESTIC WATER SERVICE SIZE _____ " ϕ
PLUMBING FIXTURE UNITS _____

DESCRIPTION OF CONSTRUCTION WORK

DESIGN PROFESSIONALS IN RESPONSIBLE CHARGE -- PER IBC 106

Plans for single-family structures 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.

<p>LICENSED ARCHITECT / STRUCTURAL ENGINEER ILLINOIS PROFESSIONAL (Check primary contact) <input type="checkbox"/> DESIGN FIRM REG. # _____</p>	<p>CIVIL ENGINEER / PROFESSIONAL ENGINEER (Check if primary contact) <input type="checkbox"/></p>
<p>BUSINESS NAME _____ CONTACT NAME _____ ADDRESS _____ CITY, STATE, ZIP _____ PHONE () _____ - _____ FAX () _____ - _____ E-MAIL _____</p>	<p>BUSINESS NAME _____ CONTACT NAME _____ ADDRESS _____ CITY, STATE, ZIP _____ PHONE () _____ - _____ FAX () _____ - _____ E-MAIL _____</p>

I HEREBY CERTIFY THAT THESE PLANS WERE PREPARED BY ME OR UNDER MY SUPERVISION, AND TO THE BEST OF MY KNOWLEDGE, COMPLY WITH ALL CODES. **ARCH / STRUCT**
(SIGNATURE) _____

APPLICATION REQUIREMENTS FOR SINGLE FAMILY CUSTOM HOME

Applicable Building codes are as follows (City of Aurora – Building Code Amendments also apply):
2015 INTERNATIONAL RESIDENTIAL CODE SERIES
STATE OF ILLINOIS PLUMBING CODE – STATE OF ILLINOIS ACCESSIBILITY CODE
2014 NATIONAL ELECTRIC CODE (per City of Aurora Electrical Ordinance)

Upon submittal acceptance a permit application number shall be issued to the applicant, all future contact with the building and permits division will require this number. One project contact shall be identified by the applicant. All correspondence between City of Aurora Division of Building and Permits and the applicant will be directed to this individual.

COMPLETE BUILDING PERMIT SUBMITTAL

- A) Provide three (3) sets of construction documents for each model. Plans will be required to be prepared by an Illinois Licensed Architect or Illinois Licensed Structural Engineer, signed and wet sealed All seals shall be on the cover sheet with an index of the sheets the stamps apply to.
 - 1) Building Code Information on the cover sheet must contain the following:
 - a) Design live and dead loads.
 - b) Square footage.
 - 2) Floor plans indicating the following: Layout of the entire floor plan, indicate all construction materials and all rated assemblies
 - 3) Building sections and wall sections as required, to describe the construction and all rated assemblies.
 - 4) Building Elevations, including all exterior openings, roof heights and footing depths.
 - 5) Structural plans and sections. All pre-Engineered building drawings are to be submitted at the time application.
 - 6) Complete Electrical plans with interconnected smoke detectors indicated.
- B) Provide two (2) loose copies and of proposed structures on scaled and dimensioned proposed grading plan with all topographical information, indicating all setbacks and easements. Also indicate proposed top of foundation elevation and elevations at all corners in foundation.
- C) Per O18-015 Section R401.4.1 A geotechnical report shall accompany all new home permit applications and shall be amended with observed in place results after excavation and prior to scheduling the footing inspection. Copy of the revised report shall be given to inspector at the footing inspection.
- D) Obtain sanitary connection permit and yellow card from Fox Metro Water Reclamation District; attention Engineering (630) 301-6882. Fox Metro does not require residential building plans. Return paid receipt 'YELLOW CARD' for attachment to permit application to the Division of Building and Permits.
- E) If in DuPage County, submit to DuPage County Highway Department for payment of Highway Impact Tax. Attention Geoffrey Edwards (630) 682-7238. Return paid receipt for attachment to permit application to the Division of Building and Permits.
- F) If in Kane County, submit to Kane County Highway Department for payment of Highway Impact Tax at (630) 584-1171. Return paid Receipt for attachment to permit application to the Division of Building and Permits.

REVIEW TIME FOR COMPLETE APPLICATION WITH IDENTIFIED CITY OF AURORA LICENSED AND BONDED CONTRACTORS AND COMPLETE CONSTRUCTION DOCUMENTS IS APPROXIMATELY TWO WEEKS. STAMPED PERMIT SET MUST BE IN JOB SITE TRAILER FOR ANY SCHEDULED INSPECTIONS. FOR ANY QUESTIONS PLEASE FEEL FREE TO CONTACT THE CITY OF AURORA BUILDING AND PERMITS DIVISION. (630) 256-3130.

This sheet is for information only and need not be attached to the permit application submittal.