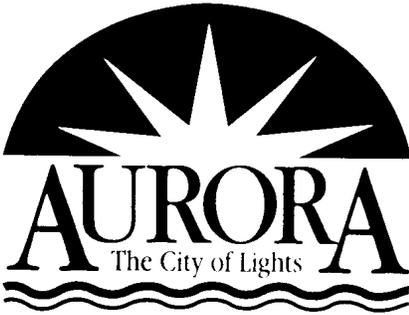


**SFHR – SINGLE FAMILY & DUPLEX INTERIOR REMODELING - APPLICATION FORM**

|                              |                          |  |
|------------------------------|--------------------------|--|
| <b>FOR OFFICIAL USE ONLY</b> | <b>TOTAL FEE</b> _____   |      |
| PERMIT APPLICATION NO        | _____                    |  |
| 1                            | BLDG _____               |  |
| _____                        | PLRV _____               |  |
| _____                        | APP FEE _____            |  |
| SUBMITTED _____              |                          |  |
| _____ / _____ / _____        |                          |  |
| NOTIFIED _____               |                          |  |
| _____ / _____ / _____        |                          |  |
| ZONING _____                 |                          |  |
| _____                        | WEB www.aurora-il.org    | <b>DIVISION OF BUILDING &amp; PERMITS</b><br>65 WATER STREET<br>AURORA, ILLINOIS 60505 |
|                              | FAX (630) 256-3139       |  |
|                              | TELEPHONE (630) 256-3130 |  |

**LAND / PARCEL INFORMATION**

**PROPERTY ADDRESS** \_\_\_\_\_

|   |                                  |                                 |                          |  |
|---|----------------------------------|---------------------------------|--------------------------|--|
| <b>COUNTY</b>                               | <input type="checkbox"/> KANE    | <input type="checkbox"/> DuPAGE | <b>TOWNSHIP</b> 11 12 04 | <b>TOWNSHIP SECTION #</b> _____                              |
| (CHECK ONE)                                 | <input type="checkbox"/> KENDALL | <input type="checkbox"/> WILL   | (CIRCLE ONE) 14 15 07    |  |
| (Call tax assessor's office with questions) |                                  |                                 | 03 01                    | <b>BLOCK #</b> (if known) _____ <b>LOT#</b> (if known) _____ |

|                               |                          |
|-------------------------------|--------------------------|
| <b>PROPERTY OWNER</b> _____   | <b>PHONE #</b> ( ) _____ |
| <b>OWNER'S ADDRESS</b> _____  | <b>FAX #</b> ( ) _____   |
| <b>CITY, STATE, ZIP</b> _____ | <b>E MAIL</b> _____      |

**ZONING / DEMOGRAPHICS INFORMATION**

**Dwelling Type**  Detached  Two Family  Townhouse

Number of Bedrooms in This Unit \_\_\_\_\_

Number of Dwelling Units in Building \_\_\_\_\_

Number of Proposed Bedrooms? \_\_\_\_\_

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 6 for descriptions)

**THREE SETS OF CONSTRUCTION DOCUMENTS**

**TYPES OF TRADE WORK INVOLVED**

**ELECTRICAL INFORMATION**

Is Electrical Work being performed  YES  NO

ELECTRIC SERVICE SIZE \_\_\_\_\_ AMPS  EXISTING

# OF CIRCUITS \_\_\_\_\_  NO CHANGE

**PLUMBING INFORMATION**

Is Plumbing Work being performed  YES  NO

DOMESTIC WATER SERVICE SIZE \_\_\_\_\_ "  $\phi$   EXISTING

PLUMBING FIXTURE UNITS \_\_\_\_\_  NO CHANGE

**MECHANICAL/GAS SYSTEM INFORMATION**

Is Mechanical Work being performed  YES  NO

AIR CONDITIONING  YES  NO

ANY GAS PIPING WORK PERFORMED  YES  NO

TYPE OF HEAT SYSTEM \_\_\_\_\_

**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  
 ELEC 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 \_\_\_\_\_

[EPA Renovate Right Pamphlet](#)  
[EPA Lead-Safe Renovation, Repair and Painting](#)  
[Compliance Guide to EPA's RRP program](#)

**Lead-Safe Work Practice Questions:**

Is this a Pre-1978 original structure? Yes  No

**If your answer is YES**  
**Please fill out EPA Lead-Safe questions on last page**

**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 construction cost for remodeling areas, provide all information]

**BUILDING AREA**

SF PRINCIPAL-REMODELED \_\_\_\_\_ SF  
SF BASEMENT / CRAWL \_\_\_\_\_ SF  
**TOTAL** \_\_\_\_\_ SF

**BUILDING COST**

REMODELED \$ \_\_\_\_\_  
BASEMENT / CRAWL \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

**DESCRIPTION OF CONSTRUCTION WORK**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DESIGN PROFESSIONAL**

**LICENSED ARCHITECT / STRUCTURAL ENGINEER**

ILLINOIS PROFESSIONAL (Check primary contact)   
DESIGN FIRM REG. # \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_  
CONTACT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_  
PHONE (    ) \_\_\_\_\_ - \_\_\_\_\_  
FAX (    ) \_\_\_\_\_ - \_\_\_\_\_  
E-MAIL \_\_\_\_\_

Single-family structure remodeling projects which involve structural changes shall be submitted with structural calculations (deflection and shear of all beams, etc.) as required by the Code Official or shall be required to be stamped by a Licensed Illinois Architect or Structural Engineer.

[EPA Renovate Right Pamphlet  
EPA Lead-Safe Renovation, Repair and Painting  
Compliance Guide to EPA's RRP program](#)

**Lead-Safe Work Practice Questions:**

Is this a Pre-1978 original structure?      Yes  No

**If your answer is YES**

**Please fill out EPA Lead-Safe questions on last page**

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.

(SIGNATURE) \_\_\_\_\_

## **Retroactive Smoke Detection for One & Two Family Homes**

**Only required for projects undergoing permit work exceeding a project valuation of \$1,000 and involving electrical work.**

Note: that the prescriptive requirements of the International Residential Building Code require retroactive compliance for smoke detectors for all one and two family homes undergoing permitted electrical work (see code passage below). This compliance would mandate hardwired interconnected smoke detectors on:

- 1.) all stories of the home,
- 2.) within 15 feet of all bedrooms and,
- 3.) within all bedrooms.

This compliance has proven to cost in the neighborhood of \$1,000 for the average home.

### **2009 INTERNATIONAL RESIDENTIAL CODE**

#### **IRC- R314.3.1 Alterations, repairs and additions.**

When alterations, repairs or additions requiring a permit occur, or when one or more sleeping rooms are added or created in existing dwellings, the **individual dwelling unit shall be equipped with smoke alarms located as required for new dwellings.**

#### **Exceptions:**

1. Work involving exterior surfaces of dwellings, such as the replacement of roofing or siding, or the addition or replacement of windows or doors, or the additions of a porch or deck, are exempt from the requirements of this section.
2. Installation, alteration or repairs of plumbing or mechanical systems are exempt from the requirements of this section.

#### **IRC- R314.4 Power Source.**

Smoke alarms shall receive their primary power from the building wiring when such wiring is served from a commercial source, and when primary power is interrupted, shall receive power from a battery. Wiring shall be permanent and without a disconnection switch other than those required for over current protection. **Smoke alarms shall be interconnected.**

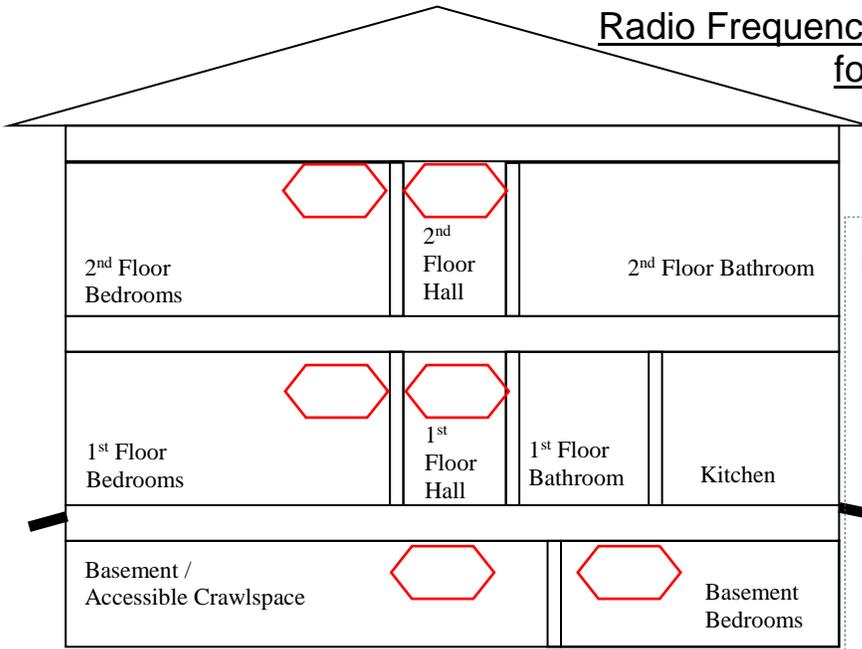
### **In light of newer UL listed radio frequency interconnection technology,**

**Aurora** has determined that we will accept a combination of a hardwired and battery only *radio frequency* interconnected smoke detectors as a design alternative to the prescriptive code requirement.

This compliance has proven to cost in the neighborhood of \$300 for the average home reducing the code prescriptive costs by about 70%. Should this additional cost prove to be a burden for your owner occupied project please asks for a permit extension to extend project completion / installation of the battery only units to 1 year from the completion of all other work.

Please see the next page to determine the locations requiring the additional smoke detector coverage should you elect to use the radio frequency interconnection design alternative. The following page shall be filled in and submitted with your permit application. Please indicate the type of detectors in the locations indicated and the construction year category (A,B,C,D). Should you home be built after 2001 please indicate that the home was built after 2001 by checking the A category and include the form so we do not trouble you by asking the question during our plan review process again.

**ONE & TWO FAMILY**  
**Radio Frequency Interconnect - Design Alternative**  
**for SMOKE DETECTOR UPGRADE**  
**REQUIREMENTS**



Only required when exceeding \$1,000 work and performing electrical work

Please fill in the **Detectors** in the diagram to the left using the Symbols below

-  New Hard-Wired Radio Frequency Interconnected
-  Existing Hard-Wired Interconnected
-  Battery only Radio Frequency Interconnected
-  Room Type Does not exist

Construction Yr.

Check (A, B, C, or D)

**Existing Smoke-Detectors in Aurora Homes by Year of Construction:**

|                  |   |                          |  |
|------------------|---|--------------------------|--|
| After 2001       | A | <input type="checkbox"/> | 2001-2010 homes (IRC 2000) required one A/C interconnected (battery-backup) detectors adjacent to each sleeping area in the home, <b>one A/C interconnected (battery-backup) detector in each bedroom</b> , and one A/C interconnected (battery-backup) detector on each story of the home.<br><br>[No additional upgrades should be required].  |
| 1995-2001        | B | <input type="checkbox"/> | 1995-2001 homes (CABO '92) required one <b>A/C interconnected (battery-backup)</b> detectors adjacent to each sleeping area in the home and one A/C interconnected (battery-backup) detector on each story of the home.<br>1. <u>Acceptable Design Alternative Upgrade</u><br>a. Replace one A/C unit with a A/C radio frequency interconnect unit coupled with;<br>b. New battery only radio frequency interconnected units added to the bedrooms.  |
| 1989-1995        | C | <input type="checkbox"/> | 1989-1995 homes (CABO '86) required one <b>A/C only detector</b> adjacent to each sleeping area in the home and one A/C only detector on each story of the home.<br>1. <u>Acceptable Design Alternative Upgrade</u><br>a. Replace one A/C unit with a A/C radio frequency interconnect unit coupled with;<br>b. Replacing the other existing A/C units with new A/C battery backed up interconnected units (note: these A/C only devices have twice outlived their listing life) and;<br>c. New battery only radio frequency interconnected units added to the bedrooms. |
| Built Before '89 | D | <input type="checkbox"/> | Retroactive State law requires non-interconnected battery detectors on each story of the home and within 15 feet outside of each bedroom.<br>1. <u>Acceptable Design Alternative Upgrade</u><br>a. Adding one A/C radio frequency unit coupled with;<br>b. Replacing other existing battery units with battery radio frequency interconnected units and;<br>c. New battery only radio frequency interconnected units added to the bedrooms.  |

# REQUIREMENTS FOR SINGLE FAMILY INTERIOR REMODELING

Applicable Building codes are as follows ([City of Aurora – Building Code Amendments also apply](#)):  
2009 INTERNATIONAL Series Codes W/ Aurora Amendments, --- State Plumbing and Energy Codes  
2008 NATIONAL ELECTRIC CODE (per City of Aurora Electrical Ordinance)

## COMPLETE BUILDING PERMIT SUBMITTAL

- A) Provide two (2) 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.
  - 2) Square footage. Floor plans indicating the following: Layout of the entire floor plan, indicate all 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 of application.
  - 6) Complete Electrical plans with interconnected smoke detectors indicated.

## BASEMENT FINISH-OUT PERMIT APPLICATION SUBMITTAL CHECKLIST

The complete application should include the following:

- Floor plan showing dimensions and labeling of all rooms and spaces.
- Window locations and sizes. (**Note: Bedrooms or dens with door and closet must have at least one window which meets current egress requirements.**  
**IF EXISTING BASEMENT EGRESS WINDOW IS REPLACED, IT MUST MEET TODAY'S SIZE REQUIREMENTS!**)
- Indicate proposed ceiling heights including locations and heights of soffits, drop ceiling areas and beams.
- Cross section of wall indicating all materials involved including insulation info.
- Indicate location of electric service panel.
- Show all new electric circuits, light and outlet locations.
- Indicate any new plumbing fixtures and piping.
- Indicate furnace and water heater locations (if enclosing around furnace, indicate make-up air detail).
- Indicate existing and new furnace register location

## EPA Lead-Safe Work Practices Information

**If you are working on PRE 1978 built structure, contractors must be EPA Lead-Safe Certified. The Lead-Based Paint Renovation, Repair and Painting (RRP) rule is a federal regulatory program affecting anyone who disturbs painted surfaces where lead may be present.**

**For more information about the program and certification please visit [www.epa.gov/lead](http://www.epa.gov/lead)**

### Lead-Safe Work Practice Questions:

Is this a Pre-1978 original structure? Yes  No

**If NO additional questions do not apply**

[EPA Renovate Right Pamphlet](#)  
[EPA Lead-Safe Renovation, Repair and Painting Compliance Guide to EPA's RRP program](#)

#### Exterior Work Questions

**YES will require EPA-RRP Contractors**

- Disturbing more than 20 sf exterior paint? Yes  No
- Window Replacement project? Yes  No
- Exterior structural demolition involved? Yes  No

#### Interior Work Questions

**YES will require EPA-RRP Contractors**

- Disturbing more than 6 sf interior paint? Yes  No
- Women of child-bearing age and/or children Under 6 residing at this structure? Yes  (No  owner signature required)

OWNER SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Attesting that women of child-bearing age and/or children under 6 **DO NOT** reside at this structure