

SITE DEVELOPMENT PERMIT APPLICATION/REQUIREMENTS

Application date: _____

Permit number: _____

State of Illinois) SS
County of Lake)

Date issued: _____

By: _____

Health Department ISD# _____

_____, being duly sworn upon their oath, in making application for a permit from the Department of Building & Zoning, Deposes and Says:

Application is hereby made for permission to erect, construct, alter or install structures or facilities as checked or described below:

Project Description: New Addition Other _____

Project Address: _____

Subdivision: _____ Lot: _____

Property Owner: _____ Phone: _____

Mailing Address: _____

Property Owner Email: _____

Contractor's Name: _____ Phone: _____

Mailing Address: _____

Contractor's Email: _____

State License Number: _____

Give written description of the following:

1. Appropriate starting date: _____
2. Area of Subject Property (Sq. Ft. or Acres): _____
Total area disturbed _____
3. Number of cubic yards of fill/excavation: _____
4. Depth of fill/excavation: _____
5. Type of fill: _____
6. Total area filled/excavated (Sq. Ft. or Acres): _____

EXPIRATION DATE: Two years after Date of Issuance of Permit.

In consideration of this application, and the issuance of a permit, I/we will conform to the regulations set forth in the Lake Villa Building and Zoning Ordinances and other applicable ordinances, and that I/we will use the site only for _____ use.

Signature of Owner or Authorized Agent

Three sets of to scale plans for residential projects must accompany this application.
Four sets of to scale plans for commercial projects must accompany this application.