



300 Portwine Road Riverwoods IL 60015 (847)-945-3990 fax (847)-945-4059

## BUILDING PERMIT APPLICATION & CONTRACTORS REGISTRATION

### INSTRUCTIONS FOR APPLYING FOR A PERMIT

Please complete this application and submit to the buildings department with the following:

- 2 COPIES OF THE PLANS, SPECIFICATIONS OR SCOPE OF WORK
- 2 COPIES OF THE PLAT OF SURVEY WHICH ARE UP TO DATE FOR EXTERNAL PROJECTS
- A COPY OF ALL CONTRACTORS CERTIFICATE OF LIABILITY INSURANCE NAMING THE VILLAGE OF RIVERWOODS AS THE ADDITIONALLY INSURED/CERTIFICATE HOLDER
- A COPY OF RELEVANT LICENSES FOR PLUMBER, ELECTRICIAN, OR ROOFER

**NOTE:** For larger projects such as new home construction or building additions, different submittal requirements apply. Please contact [bldg@villageofriverwoods.com](mailto:bldg@villageofriverwoods.com) for more information.

<u>APPLICANT INFORMATION</u>	<u>OWNER INFORMATION</u>
NAME _____	NAME(S) _____
ADDRESS _____	ADDRESS _____
PHONE # _____	PHONE # _____
EMAIL _____	EMAIL _____

**TYPE OF PERMIT** \_\_\_\_\_

**ESTIMATED VALUE OF CONSTRUCTION** \_\_\_\_\_

**DESCRIPTION/SCOPE OF WORK (Please attach additional information on separate sheet):**

\_\_\_\_\_

\_\_\_\_\_

- INSPECTIONS ARE REQUIRED ON ALL PERMITS AND PERMITS ARE VALID FOR ONE YEAR FROM ISSUE DATE
- THERE IS A \$75.00 FEE FOR FAILED INSPECTIONS.
- ROAD WEIGHT LIMITS ARE 6 TONS PER AXLE MAXIMUM FOR DIVISIBLE LOADS.
- WORK HOURS ARE MONDAY-FRIDAY 7:00 AM - 7:00 PM. SATURDAY 8:30 AM-5:00 PM
- **ADDITIONAL CONSULTANT FEES MAY BE INCURRED AFTER THE PERMIT HAS BEEN ISSUED**
- **BY SIGNING THIS APPLICATION THE APPLICANT AND OWNER AGREE TO THESE TERMS AND CONDITIONS**

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Approved by

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

[bldg@villageofriverwoods.com](mailto:bldg@villageofriverwoods.com)

**CONTRACTORS REGISTRATION (Click highlighted field to enter applicable information)**

<b><u>ARCHITECT</u></b>	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>CONCRETE</u></b>	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>ELECTRICAL</u></b>  _____ License #	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>GENERAL CONTRACTOR</u></b>	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>MECHANICAL</u></b>  _____ License #	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>PLUMBER</u></b>  _____ License #	NAME _____ PHONE # _____ ADDRESS _____ EMAIL _____
<b><u>ROOFER</u></b>  _____ License #	NAME _____ PHONE# _____ ADDRESS _____ EMAIL _____