



General Permit Application*

***Permit processing may take up to 10 businesses days.**

Check List: Permit Application must include the following where applicable.

- Contractor Registration Plat of Survey/Drawing Homeowners Assoc. Approval Letter Proposal/Contract

Property Owner: _____ Phone: _____

Address: _____ Email: _____

If this is a rental property, list tenant/s name and phone # _____

Type of Project: (Check all that apply.)

- Fence Driveway Sidewalk Shed Garage Roof Siding Windows Fireplace
 Seawall Deck/Patio 4 Seasons Room Pool New HVAC Finish Basement/No Bath
 Finish Basement and Bath Upgrade Electric Service Other (list) _____

Brief Description of Project: _____

Type of Contractor(s) Used: (Check all that apply.) General Electrical Landscape Fence

- Concrete Siding Roof, License # _____ Plumber, License # _____

Contractor Name: _____ Work Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

Contractor Name: _____ Work Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

List additional contractors on back of this form or attach a separate sheet of paper.

In consideration of this application and attached forms being made part thereof, and the issuance of permits, I/we will conform to the regulations set forth in the Village of Island Lake Building and Zoning Codes and Fee Schedule. I/we also agree that all work performed under said permit will be in accordance with the plans and plat diagram which accompanies this application, except for such changes as may be authorized by the Building Official. It is the responsibility of the Contractor(s) and Homeowner(s) to make sure all construction is completed according to the Village Codes.

Permit Applicant _____

Date _____

DO NOT WRITE BELOW THIS LINE

Plan Review: \$ _____
 Permit: \$ _____
 Permit: \$ _____
 Inspection: \$ _____
 Total: \$ _____

Date received: _____

Date Issued: _____ Permit #: _____ Permit Fee Due: \$ _____

Building Official: _____ Date: _____