

Department of Planning and Development
McHenry County Government Center - Administration Building

2200 North Seminary Avenue
Woodstock, Illinois 60098



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www.co.mchenry.il.us

**RE-SIDING, ELECTRIC SERVICE,
HVAC & PLUMBING EQUIPMENT
ITEMS REQUIRED TO APPLY FOR A BUILDING PERMIT**

1. Site Plan showing lot dimensions and setbacks for zoning purposes.
2. Permit Application.
3. Name and copy of state license and registration of plumber and letter of intent. **(FOR PLUMBING ONLY)**
4. **A nonrefundable review fee must be paid at the time of application. Cash or Check Only.**

IF TIME ALLOWS, THESE PERMITS COULD BE ISSUED OVER THE COUNTER

Office Use Only
Zoning _____
Category _____

PERMIT APPLICATION FOR ALTERATIONS AND ACCESSORY STRUCTURES

OWNER INFORMATION:	CONTRACTOR INFORMATION:
Name _____	Name _____
Address _____	Address _____
City, St, Zip _____	City, St, Zip _____
Daytime Phone _____	Phone _____

PARCEL INFORMATION:

Address _____

City _____ Zip _____ Property Phone: _____
(If Applicable)

Parcel/Tax Number _____

Lot _____ Block _____ Unit _____

Subdivision _____

Mail Permit To: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Pickup	Number of Stories: _____
Construction: <input type="checkbox"/> Alteration <input type="checkbox"/> Accessory	Number of Rooms: _____
Building: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Number of Bedrooms: _____
<input type="checkbox"/> Utility <input type="checkbox"/> Agricultural Exempt	Number of Bathrooms: _____
Building Type: <input type="checkbox"/> Private <input type="checkbox"/> Public	

Electrical Wiring? <input type="checkbox"/> Yes <input type="checkbox"/> No	Amps of panel 100 _____ 200 _____ 400 _____ other _____
Type of Heat <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Water	Exterior Wall Type: _____
Central Air? <input type="checkbox"/> Yes <input type="checkbox"/> No	Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No
# of Fireplaces and/or Woodburning Stoves _____	Garage: <input type="checkbox"/> None <input type="checkbox"/> Attached <input type="checkbox"/> Detached
Chimney Type: _____	
Total # of Plumbing Fixtures: _____	
Sinks _____ Toilets _____ Tubs _____ Showers _____ Misc _____ Hose Bibb _____ DW _____	

Fencing: <input type="checkbox"/> Yes <input type="checkbox"/> No	Wrecking: <input type="checkbox"/> Yes <input type="checkbox"/> No	Stormwater Review: <input type="checkbox"/> Yes <input type="checkbox"/> No
New Siding: <input type="checkbox"/> Yes <input type="checkbox"/> No	Ag Exempt: <input type="checkbox"/> Yes <input type="checkbox"/> No	Red Tag: <input type="checkbox"/> Yes <input type="checkbox"/> No
New Foundation: <input type="checkbox"/> Yes <input type="checkbox"/> No	Pool: <input type="checkbox"/> None <input type="checkbox"/> Aboveground <input type="checkbox"/> Inground	

Roofers Name: _____	Architect: _____
Roofers License #: _____	Stormwater Engineer: _____
Electrician: _____	HVAC Contractor: _____
Excavator: _____	Plumber: _____
Concrete Contractor: _____	Plumber License #: _____
	Plumber Registration#: _____

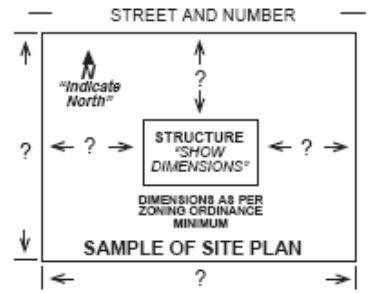
Square Footage of Work Covered by This Permit:

Main Sq. Ft. _____ Garage Sq. Ft. _____ Deck/Porches Sq. Ft. _____

Approximate Value of Work Covered by This Permit: _____

SITE PLAN

- Parcel stakes *must* be visible
- Show *all* structures existing on parcel at present time (incl. well & septic)
- Note if your facility is *existing* or *proposed*
- Note parcel size and building location
- Indicate *north* direction
- Indicate *all* adjacent roads/streets (both improved & unimproved)



ALL SETBACKS ARE MEASURED FROM THE OVERHANG TO THE PROPERTY LINE!

*SKETCH YOUR SITE PLAN BELOW - SUPPLY COMPLETE INFORMATION
LOCATE BUILDINGS ON PARCEL BY DIMENSIONS TO PARCEL LINES - NOTE ABOVE SKETCH*

NOTE: FRAUDULANT MISREPRESENTATIONS ON THE SITE PLAN MAY RESULT IN FORFEITURE OF ANY PERMIT ISSUED BY MCHENRY COUNTY PURSUANT TO A REVIEW OF THE APPLICATION.

NO INSPECTIONS UNTIL CULVERT IS INSTALLED AND ACCESS TO SITE IS AVAILABLE

P.I.N. _____ PERMIT # _____ DATE ISSUED _____

LOT/S # _____ BLOCK # _____ SUBDIVISION _____ UNIT # _____

ADDRESS _____

SITEPLAN.FOB 02/06/11 - CSM