

VILLAGE OF CAMPTON HILLS

40W115 Campton Crossings Dr. Unit B, Campton Hills, IL. 60175

TEL: (630) 584-5700 • FAX (630) 584-5775

APPLICATION & PERMIT

Date: _____

OWNER

Job Address	
Name	
Address	
City/Zip	
Telephone	Fax Number

Lot	
Block	Unit
Sub'd.	
PIN.	
Zoning	

NOTICE

A certificate of occupancy and compliance must be issued prior to occupancy of all new structures, additions and for change of use.

Description of work				
				(Valuation)
		Fees		Fees
Site Plan Check Fee		\$	Sign	\$
Plat of survey		\$	Fence	\$
As-Built / Grading		\$	Above Ground Pool	\$
Village Admin fee for temporary		\$	In Ground Pool	\$
Building plan review		\$	Deck	\$
Building inspections		\$	Accessory Building / Shed	\$
School Impact Fee		\$	Total Fee	
Park Impact Fee		\$	Deposit	(minus) (\$)
			BALANCE DUE: \$	

CONDITIONS OF PERMIT

In consideration of this application and attached forms being made a part thereof and the issuance of permit, I will conform to the regulations set forth in the Village of Campton Hills codes and ordinances.

I also agree that all work performed under said permit will be in accordance with the plans and specifications which accompany this application, except for such changes as may be authorized or required by the Building Official.

All Village fees and fees to other agencies shall be paid before a Certificate of Occupancy is issued.

PERMIT VALID FOR 18 MONTHS FROM DATE OF ISSUE

Fee paid \$ _____ Check # _____

Received by _____

Notes:

Reinspection fees have to be paid before work can continue.

Owner or Authorized Agent: _____

Licensed Contractor: _____

A permit for the above work is hereby authorized

Date _____ Building Official _____ Permit No. _____

General Contractor		Architect	
Contact Name		Contact Name	
Address		Address	
City/Zip		City/Zip	
Telephone	Fax Number	Telephone	Fax Number
Cell		Cell	
Email		Email	
License		License	

Roofing Contractor		Plumbing Contractor	
Contact Name		Contact Name	
Address		Address	
City/Zip		City/Zip	
Telephone	Fax Number	Telephone	Fax Number
Cell		Cell	
Email		Email	
License		License	

Electrical Contractor		HVAC Contractor	
Contact Name		Contact Name	
Address		Address	
City/Zip		City/Zip	
Telephone	Fax Number	Telephone	Fax Number
Cell		Cell	
Email		Email	
License		License	

Engineer		Concrete Contractor	
Contact Name		Contact Name	
Address		Address	
City/Zip		City/Zip	
Telephone	Fax Number	Telephone	Fax Number
Cell		Cell	
Email		Email	
License		License	

Excavating Contractor		Carpentry Contractor	
Contact Name		Contact Name	
Address		Address	
City/Zip		City/Zip	
Telephone	Fax Number	Telephone	Fax Number
Cell		Cell	
Email		Email	
License		License	