



VILLAGE OF THIRD LAKE

87 N. LAKE AVENUE
THIRD LAKE, IL
60030

PHONE: 847.223.8422

FAX: 847.223.9356

PERMIT REQUIREMENTS FOR ATTACHED SCREEN PORCH

The following is a list of items required for submittal with all applications for Attached Screen Porches. **Please return all of the following to the Village Hall at the above address. Please include a daytime phone number on the application. You will be notified when the permit is ready to be issued.**

1. Completed Building Permit Application. Application must be signed, dated and include the total value of the project.
2. Provide 2 copies of Plat of Survey which must be up-to-date, to scale, and legible with legal description of property.
3. Provide 2 copies of Plot Plan indicating all existing and proposed buildings, driveways, patios, pools, fences, etc., and showing all building setbacks as required by Village Zoning Ordinances. This may be shown on the property survey.
4. Provide 2 copies of Construction Plans showing in sufficient detail the nature and extent of the work.
5. Submit plans indicating trees of greater than 8" in diameter scheduled for removal, their proposed replacement, and the delineation of tree preservation areas. If no trees are to be removed, such must be stated on plot plans.
6. Completed Contractor's List. Per Village Ordinance, all plumbing and roofing contractors must be licensed by the Village. A business license application and \$20.00 license fee must be submitted to the Village before a permit will be issued. **It is the resident's responsibility to contact JULIE 48 hours (2 working days) before digging. 1.800.892.1023.**
7. A \$170.00 non-refundable deposit for zoning review is due at the time application is received by the Village. An additional fee may be required for engineering review. Permit applications cannot be processed until these fees are paid. Please make checks payable to the Village of Third Lake. There will be an additional permit fee payable upon issuance of building permit.



87 N. Lake Ave.
847.223.8422

Permit Application

OFFICE USE ONLY

Project # _____
Zoning _____
BP App # _____
SD App # _____
Sew/Well App # _____

Property Information:

Address: _____

PIN: _____
Date: _____

Owner's Information:

Name: _____
Address (if different than property address listed above): _____
City: _____ State: _____ ZIP: _____
Phone: _____ Cell Phone: _____
FAX: _____ Email: _____

Primary Contact Information (not required if owner is the primary contact):

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Cell Phone: _____
FAX: _____ Email: _____

Project Information:

Existing Use: _____
Description of Project: _____

Cost of Project: _____ Cost of Alterations: _____
Total Sq Footage of Project: _____ Total Disturbed Area (square feet): _____

Regarding this application and other supporting documents and issuance of permits/projects thereto, I/we hereby certify that I/we have provided Lake County with complete and accurate information relating to our proposal; I/we will conform to all Lake County and other applicable ordinances; I/we agree that all work performed under said permit/project will conform to the plans accompanying this application except for changes authorized by Lake County staff; and I/we acknowledge that approval of this permit/project only authorizes (indicate specific use) _____ use. I/We understand that submission of incomplete or inaccurate information may affect the validity of approvals issued.

Office Use Only

Applicant was provided:

- Fire Protection District Letter
- Home Owners Association Requirements

Permit Facility Project Manager

Signature of Owner or Authorized Agent

Contractor's Information: *(Provide information as applicable)*

Architect Name: _____

Address: _____

Phone: _____ Email: _____

Engineer Name: _____

Address: _____

Phone: _____ Email: _____

General Contractor Name: _____

Address: _____

Phone: _____ Email: _____

Carpentry Contractor Name: _____

Address: _____

Phone: _____ Email: _____

Electrical Contractor Name: _____

Address: _____

Phone: _____ Email: _____

Heating Contractor Name: _____

Address: _____

Phone: _____ Email: _____

Plumbing Contractor Name: _____

Address: _____

Phone: _____ Email: _____

License #: _____

Roofing Contractor Name: _____

Address: _____

Phone: _____ Email: _____

License #: _____

Septic System Designer Name: _____

Address: _____

Phone: _____ Email: _____

License #: _____

Well Contractor Name: _____

Address: _____

Phone: _____ Email: _____

License #: _____