## Village of South Elgin Community Development Department

10 N. Water Street 847-741-3894 847-741-3959 FAX

Permit #: \_

Monday – Friday 8:30 a.m. – 5:00 p.m. www.southelgin.com

## **NEW BUSINESS WORKSHEET**

| PROPERTY INFORMATION   |   |  |  |  |
|--|---|--|--|--|
| Property Address:  | South Elgin, IL 60177   |  |  |  |
| BUSINESS INFORMATION   |   |  |  |  |
| Common Business Name:  |   |  |  |  |
| Corporate Business Name:   |   |  |  |  |
| Business Address:  |   |  |  |  |
| Business Email:  |   |  |  |  |
| Business Phone: () Business Fax: ()  |   |  |  |  |
| BUSINESS OWNER INFORMATION   |   |  |  |  |
| Business Owner's Name:   |   |  |  |  |
| Business Owner's Address:  |   |  |  |  |
| Business Owner's Email:  |   |  |  |  |
| Business Owner's Phone: ()   |   |  |  |  |
| PROPERTY OWNER INFORMATION   |   |  |  |  |
| Property Owner's Name:   | _   |  |  |  |
| Property Owner's Address:  |   |  |  |  |
| Property Owner's Phone: ()   |   |  |  |  |
| ADDITIONAL INFORMATION   |   |  |  |  |
| Applicant (check): ☐ Property Owner ☐ Contractor ☐ Tenant ☐ Other:   |   |  |  |  |
| I have read & understand the attached process detail. Initial: Date:   | _   |  |  |  |
| In consideration of this application and attached forms being made a part thereof and the issuance of permit, the Village of South Elgin Codes and Ordinances. I also agree that all work performed under said permit will specifications and plat diagram which may accompany this application, except for such changes as may be n Village of South Elgin. No work shall be conducted until a permit is issued and obtained. I will submit this wis covered up, and prohibit the occupancy of any space until a Certificate of Occupancy or Letter of Completi Development Department. The applicant has furnished the information contained herein. | be in accordance with the approved plans,<br>ecessary and authorized or required by the<br>ork to the required inspections, before work |  |  |  |
| Property Owner Signature:  | Date:   |  |  |  |
| Business Owner Signature:  | Date:   |  |  |  |
| Business Owner Name & Title (please print):  |   |  |  |  |
| (OVER – Go to Page 2)  |   |  |  |  |
| For Office Use Only  Submittal Chacklist:   Application Complete   Submittal Workshoot   |   |  |  |  |

Received By: \_\_\_\_\_

PIN: \_\_\_

Date Received: \_

## **NEW BUSINESS WORKSHEET**

| BUSINESS DETAILS  |                    |                   |           |               |
|---|--------------------|-------------------|-----------|---------------|
| 1. Has the unit/building been vacant for more than 60 Days?   | ☐ Yes              | □ No              |           | □ Unknown     |
| 2. Type of proposed business (be specific: indicate type of service   | es provided/prod   | ucts sold or ma   | ade): _   |               |
|   |                    |                   |           |               |
|   |                    |                   |           |               |
| 4. Proposed occupancy date:5  | . Square footage   | of business:      |           |               |
| 6. Number of parking spaces:  |                    |                   |           |               |
| ADDITONAL LICENSES  |                    |                   |           |               |
| 7. Will the proposed business sell tobacco or alcohol?  | □Y€                | es 🗆              | l No      |               |
| 8. Will the proposed business sell secondhand items (resale)?   | □Y€                | es 🗆              | l No      |               |
| 9. Will the proposed business have coin-in-slot amusement device  | es? □ Ye           | es 🗆              | l No      |               |
| If you answered yes to any of questions 7-9, a license is required. Co regarding alcohol and coin-in-slot amusement device licenses. Conta tobacco and secondhand sto | act the Police Dep |                   |           |               |
| SIGNAGE DETAILS   |                    |                   |           |               |
| 10. Will you be replacing exterior signage for the business?  | □ Yes              | □ No              |           |               |
| 11. Will you have temporary signage?  | ☐ Yes              | □ No              |           |               |
| A permit is required for temporary and permanent signs. Submit a Application for all proposed   |                    | cation or Tempo   | orary Sig | n Permit      |
| CONSTRUCTION DETAILS  |                    |                   |           |               |
| 12. Will you be making any alterations to the electrical system?  | □ Yes              | □ No              |           |               |
| 13. Will you be making any alterations to the plumbing system?  | ☐ Yes              | □ No              |           |               |
| 14. Will you be completing any other alterations, such as moving  | or adding walls o  | r doors?          | l Yes     | □ No          |
| A building permit is required for nonresidential alterations. Submit a No of questions 12-14  |                    | ling Permit if yo | u selecte | ed yes to any |

## **PROCESS DETAILS**

**Step 1:** Submit the New Business Worksheet. For any questions regarding this worksheet, contact the Community Development at 847-741-3894.

**Step 2:** Pay the \$100 application fee and contact the Community Development Department to schedule a Property Maintenance Inspection. At the Property Maintenance Inspection, the inspector will verify code compliance of address numbers, gas/electric meters addressed, process ventilation, plumbing leaks, heating, electrical panel labeled, lighting fixtures, unobstructed path of travel, handrails/guardrails, emergency escape(s), electrical system hazards, process waste disposal, individual water meter, individual RPZ, fire resistance rated construction, and hazard group.

**Step 3:** Receive approvals from the following:

- A. Building Approval: Passed Property Maintenance Inspection, all required Permits have been completed.
- **B. Zoning Approval:** Verification that the use is allowed in the proposed location.
- c. Finance Approval: Verification that all outstanding balances have been paid (e.g. water/sewer bills).
- **D.** Public Works Approval: Verification of individual water meter and individual RPZ. (51.33)
- E. South Elgin & Countryside Fire District (847-531-8641): Passed Safety Inspection.
- F. Kane County Health Department (630-444-3040) Passed health inspections, for food only.
- **G. FRWRD Permit Approval (847-742-2068):** Receive permit from Fox River Water Reclamation District. \*Note: Approvals for A-E will be handled by the Community Development Department. Contact all others directly.

Step 4: Receive Certificate of Occupancy and may now open your business. Welcome to South Elgin!