

Village of South Elgin
Community Development Department

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

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

BASEMENT REMODEL APPLICATION

PROPERTY INFORMATION

Address: _____ **South Elgin, IL 60177**

PROPERTY OWNER INFORMATION

Name: _____

Address: _____

Email: _____

Phone: (____) _____ - _____ Fax: (____) _____ - _____ Cell: (____) _____ - _____

OTHER CONTACT INFORMATION (If applicable)

Contractor Type: _____

Business Name: _____ Contact Person: _____

Address: _____

Email: _____

Phone: (____) _____ - _____ Fax: (____) _____ - _____ Cell: (____) _____ - _____

OTHER CONTACT INFORMATION (If applicable)

Contact Type: _____

Business Name: _____ Contact Person: _____

Name: _____ Contact Person: _____

Email: _____

Phone: (____) _____ - _____ Fax: (____) _____ - _____ Cell: (____) _____ - _____

ADDITIONAL INFORMATION

Estimated Value of Work: _____ Applicant (check): Property Owner Contractor Tenant
 Other: _____

I have read & understand the attached fact sheet. Initial: _____ Date: _____

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 South Elgin Codes and Ordinances. I also agree that all work performed under said permit will be in accordance with the approved plans, specifications and plat diagram which may accompany this application, except for such changes as may be necessary and authorized or required by the Village of South Elgin. No work shall be conducted until a permit is issued and obtained. I will submit this work to the required inspections, before work is covered up, and prohibit the occupancy of any space until a Certificate of Occupancy or Letter of Completion has been obtained from the Community Development Department. The applicant has furnished the information contained herein.

Applicant Signature: _____ Date: _____

Applicant Name & Title (please print): _____

(OVER – Go to Page 2)

For Office Use Only

Submittal Checklist: Application Complete Submittal Checklist Submittal Worksheet

Permit #: _____ Date Received: _____ Received By: _____ PIN: _____

Village of South Elgin
Basement Remodel Permit Fact Sheet



MINIMUM REQUIREMENTS:

All residential structures are subject to all current Zoning regulations as adopted and amended. Further information can be obtained from the Village of South Elgin web site at www.southelgin.com. Building regulations are as follows:

- **2015 INTERNATIONAL MECHANICAL CODE**
- **CURRENT ILLINOIS ENERGY CONSERVATION CODE**
- **2015 INTERNATIONAL FUEL GAS CODE**
- **2015 INTERNATIONAL RESIDENTIAL ELECTRICAL CODE**
- **2014 NFPA 70 NATIONAL ELECTRICAL CODE**
- **2015 INTERNATIONAL PLUMBING CODE**
- **2015 INTERNATIONAL RESIDENTIAL CODE**
- **CURRENT STATE OF ILLINOIS PLUMBING CODE**
 1. Any sleeping room must have interconnected, hard wired smoke detector equipped with battery backup and an emergency escape. *R310 & R314.4*
 2. Every accessible space must have a switched light fixture. *E4001.6*
 3. Escape window must remain accessible. *R310.2.4*
 4. Heating equipment and ductwork system shall be sized to supply air volume sufficient to properly heat all existing and newly created spaces as required. *M1601.1*
 5. Provisions for the proper volume of combustion air, to all fuel burning devices must be provided. *M1701*
 6. Water meters, (min.18" work space clearance at all sides) sump pumps and floor plumbing cleanouts must be and remain readily accessible. *R202*
 7. Gas valves & water valves must be and remain readily accessible. *R202*
 8. All electrical connection/junction boxes must remain accessible. *R202*
 9. All exterior foundation walls (including areas that are not being finished) shall receive not less than R-19 insulation and covered to prevent excessive spread of smoke and flame. *N1101*
 10. All wood bottom wall plates or other wood components that remain permanently in contact with the concrete floor/wall shall be treated for decay resistance. *R317*
 11. The bathrooms must have a power air exhaust system (NOT LESS THAN 50 CFM.) piped to the exterior. *M1507.2*
 12. Ceilings shall be not less than 7 ft. in height from finished floor, (this includes suspended ceilings of all types.) Exception: beams and necessary soffits may project not more than 8" into the required height. *R305.1*

Covenants are regulated by your Homeowners Association; covenants are not enforced by the Village.

PERMIT FEES:

1. Each application for a building permit for new basement remodel shall pay \$.50 per square foot of gross floor area.
2. In addition to the base building permit fee above, the building permit fee shall include the aggregate of the following:
 - a. Plan review fee. A preliminary and/or plan review fee by the village staff shall be charged at 25% of permit fees.
 - b. Consultants fees (plumbing), if applicable. The applicant shall reimburse the village for all fees and expenses charged to the village by consultants retained by the village to review plans, building systems and to perform testing where deemed necessary by the village.
 - c. \$75 fee, if a reinspection becomes necessary.

SUBMITTAL REQUIREMENTS: Submit all plans in triplicate.

1. Provide **plan (3 copies)** indicating the following:
 - a. Exterior and interior typical wall section, from existing floor up to and including the ceiling and soffit, including those existing areas that remain unfinished. Name all walled-in and existing spaces.
 - b. Show all the window / escape window sizes and locations.
 - c. Show all electrical switches and indicate the device each switch controls. Show all receptacles and smoke detectors. Show all other electrical breaker panels and the amperage size and location.
 - d. Show HVAC ducts and all air supply discharge and return air locations.
 - e. Take note: Combustion air (that air necessary for proper fuel gas burn and exhaust draft) piped directly from the exterior may be required when the furnace and/or water heater is being walled-into a confined space.
2. Provide the **Plumber's License**, if plumbing work is not being done by the owner-occupant of the home.
3. Provide the **Plumber Contractor's Registration**, if plumbing work is not being done by the owner-occupant of the home.
4. Provide the **letter of intent**, if plumbing work is not being done by the owner-occupant of the home.
5. Provide a plumbing pipe **isometric** drawing plan that includes identification of all piping, sizing, apparatus location and spacing and all connection points of new to existing. Include pipe sizing of existing.
6. Complete the attached **Residential Permit Plumbing Submittal Sheet**

The Community Development Department does not require submittal of social security numbers. Black out social security numbers on any documents prior to submittal.

Village of South Elgin
Residential Permit Plumbing Submittal Sheet

RESIDENTIAL PLUMBING INFORMATION SUBMITTAL SHEET

Note: Applicable codes are: current Illinois Plumbing Code and 2015 International Residential Code.

This form must be completed to expedite the plumbing plan code compliance review for your new room, addition or residential remodeling.

Please enter the number of fixtures for each category.

| | PROPOSED FIXTURES | EXISTING FIXTURES (in entire building) |
|------------------------|-------------------|-------------------------------------------|
| Water Closet (Toilets) | _____ | _____ |
| Lavatories (Sinks) | _____ | _____ |
| Dishwasher | _____ | _____ |
| Kitchen Sink(s) | _____ | _____ |
| Laundry Tub | _____ | _____ |
| Washing Machine | _____ | _____ |
| Tub/Shower Combo Unit | _____ | _____ |
| Shower-Only | _____ | _____ |
| Tub-Only | _____ | _____ |
| Bar Sink | _____ | _____ |
| Water Heater | _____ | _____ |

Existing Water Service Pipe Size (From B-Box to Meter Inside House): _____

Existing Water Meter Pipe Size (Meter Only): _____

For all proposed new work, please attach a line diagram (isometrics) indicating waste, vent and water piping type and sizing for the new fixtures.

Comments: _____

Project Type: _____

Location of Project in Building: _____

Applicant: _____ Date: _____

Address: _____

Phone: _____

Plumbing Contractor: _____