

## COMMERCIAL BUILDING PERMIT APPLICATION

Permit No.: \_\_\_\_\_

Date: \_\_\_\_\_

### PART 1 – OWNER/APPLICANT INFORMATION

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Business Name \_\_\_\_\_

Address \_\_\_\_\_

Home/Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### PART 2 – PROPERTY INFORMATION

Street Address (9-1-1 approved) \_\_\_\_\_

Development Name \_\_\_\_\_ Lot Number \_\_\_\_\_

Current Zoning \_\_\_\_\_ Parcel ID # \_\_\_\_\_

### PART 3 – CONTRACTOR INFORMATION

<i>Contracting Services</i>	<i>Name</i>	<i>Phone/Cell No.</i>	<i>License No.</i> <small>Where applicable</small>
Architect/Design Professional			
General Contracting			
Concrete Foundation			
Concrete Flatwork			
Drywall/Plaster			
Excavation			
Electrical			
Framing			
Fire Suppression			
Hood Exhaust and Extinguish System			
HVAC			
Landscaping			
Plumbing			
Roofing			

**PART 4 – CONSTRUCTION INFORMATION**

Street Frontage	# of Residential Units	Living Area (sq. ft.)
Front Setback (prop. line)	# of Commercial Units	Garage Area (sq. ft.)
Rear Setback (prop. line)	# of Stories	Office/Sales (sq/ ft.)
Left Setback	# of Public Bathrooms	Service (sq. ft.)
Right Setback	# of Private Bathrooms	Manufacturing (sq. ft.)
Height Above Grade	# of ADA-Compliant Bathrooms	Parking Area (sq. ft.)
Lot Area (sq. ft.)	Windows	# of Parking Spaces
Building Area (sq. ft.)	Fireplaces	# of Handicapped Parking Spaces
% of Lot Coverage	Elevator/Escalator	# of Enclosed Parking Spaces
Est. Start Date	Est. Finish Date	Est. Bldg. Value \$

**Proposed Use:**

Assembly

- Church
- Night Club
- Restaurant
- Theater
- Other: \_\_\_\_\_
- Business

Educational

- College
- Day Care Facility
- Grades 1-12
- Other: \_\_\_\_\_

Factory

- Low Hazard
- Moderate Hazard
- Other: \_\_\_\_\_
- High Hazard

Institutional

- Group Home
- Hospital
- Jail
- Nursing Home
- Other: \_\_\_\_\_
- Mercantile

Residential

- Assisted Living
- Hotel/Motel
- Multi-Family

Storage

- Low Hazard
- Moderate Hazard

Other

- Motor Fuel Service
- Public Utility
- Repair Garage
- \_\_\_\_\_
- \_\_\_\_\_

**Type of Construction:**

Type I		Type II		Type III		Type IV	Type V	
<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/>	<input type="checkbox"/> A	<input type="checkbox"/> B

Improvement Type:

- New Construction
- Addition
- Interior Finish

Structural Frame: (Check all that apply)

- Concrete
- Masonry
- Steel
- Wood
- Other: \_\_\_\_\_

Exterior Walls: (Check all that apply)

Concrete     Masonry     Steel     Wood     Other: \_\_\_\_\_

Structural: Any **structural assemblies** fabricated off-site?     Yes     No: \_\_\_\_\_

Electrical:

Total Amps \_\_\_\_\_    # of Arc-fault Circuits: \_\_\_\_\_    # of Small Appliance Circuits: \_\_\_\_\_

Plumbing:

Public Sewer:     Yes     No       Sump Pump:     Yes     No       Ejector Pump:     Yes     No

**PART 5 – PERMIT REQUIREMENTS**

***Minimum Code Requirements:***

- Compliance with the latest adopted edition of the *National Electric Code Standard NFPA #70*
- Compliance with the latest adopted edition of the *International Building Code*
- State of Illinois law requires compliance with the latest adopted edition of the *Illinois Energy Conservation Code*
- State of Illinois law requires compliance with the latest adopted edition of the *Illinois Plumbing Code*

***The following items must be submitted before a building permit can be issued:***

1. Two sets of building plans, signed and sealed by an Illinois licensed architect or design professional that include:
  - Site plan including drainage and storm water detention, elevations, setbacks from building to property lines, utilities entering building and underground, site details, storm flow, etc.
  - Drainage calculations
  - Parking plan showing required handicap spaces, ramps, signage, sidewalks, parking blocks, landscaping, dimensions, trash receptacle enclosure, etc.
  - Exterior elevation plan showing all exterior building materials to be used
  - Foundation/footing plan notes and details. Boring/soil compaction tests may be required
  - Floor plan details and notes
  - Structural drawings, details and notes, wall sections
  - Electric/lighting plan, details and notes
  - Ceiling plan
  - Mechanical plan, details and notes
  - Plumbing plan (Reviewed and approved by the Dept. of Public Health)
  - Roof plan, details and notes

- Door, window and finish schedule
- Project Specification Manual - one copy
- 2. Commercial building permit application completed by architect or design professional
- 3. Any access permits from IDOT, if required
- 4. Drainage plan and calculations approved by IDOT if property drains to any IDOT right-of-way

**NOTE: PLEASE ALLOW 7-14 WORKING DAYS FOR PLAN REVIEW BEFORE PERMIT WILL BE APPROVED AND ISSUED.**

**PART 6 – CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official or the Code Official’s authorized representatives shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Furthermore, approval of this building permit application and issuance of a building permit does not give permission to violate the City of Troy’s building and zoning codes. Where applicable, State of Illinois codes and regulations may be more stringent.

***Building permit fees are non-refundable.***

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Signature of Applicant/Owner	Date	Phone/Cell Phone
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Contact Person in Charge of Work (Title)	Phone	Cell Phone
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**Office Use Only:**

Cost of Construction per ICC Valuation Data: \_\_\_\_\_

Building Permit Fee: \_\_\_\_\_

Approved: \_\_\_\_\_

Code Official	Date
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## CERTIFICATION OF AWARENESS OF THE ILLINOIS ENERGY CONSERVATION CODE

*Note: This form must be filled out completely, **signed before a Notary Public**, and submitted to the Building & Zoning Department for approval before permit will be issued.*

Construction site address: \_\_\_\_\_

I, \_\_\_\_\_, certify that I am aware of the building requirements of the Illinois Energy Conservation Code and will have on record for the above address required documentation and testing reports in the following areas: Insulation ratings, glass and door U-factor ratings, heating and cooling equipment efficiency, building air leakage testing, duct tightness testing, REScheck/REMrate/COMcheck results.

*Sign in person before a Notary Public:*

\_\_\_\_\_  
Signature of Contractor Date

\_\_\_\_\_  
Name of Company (if applicable)

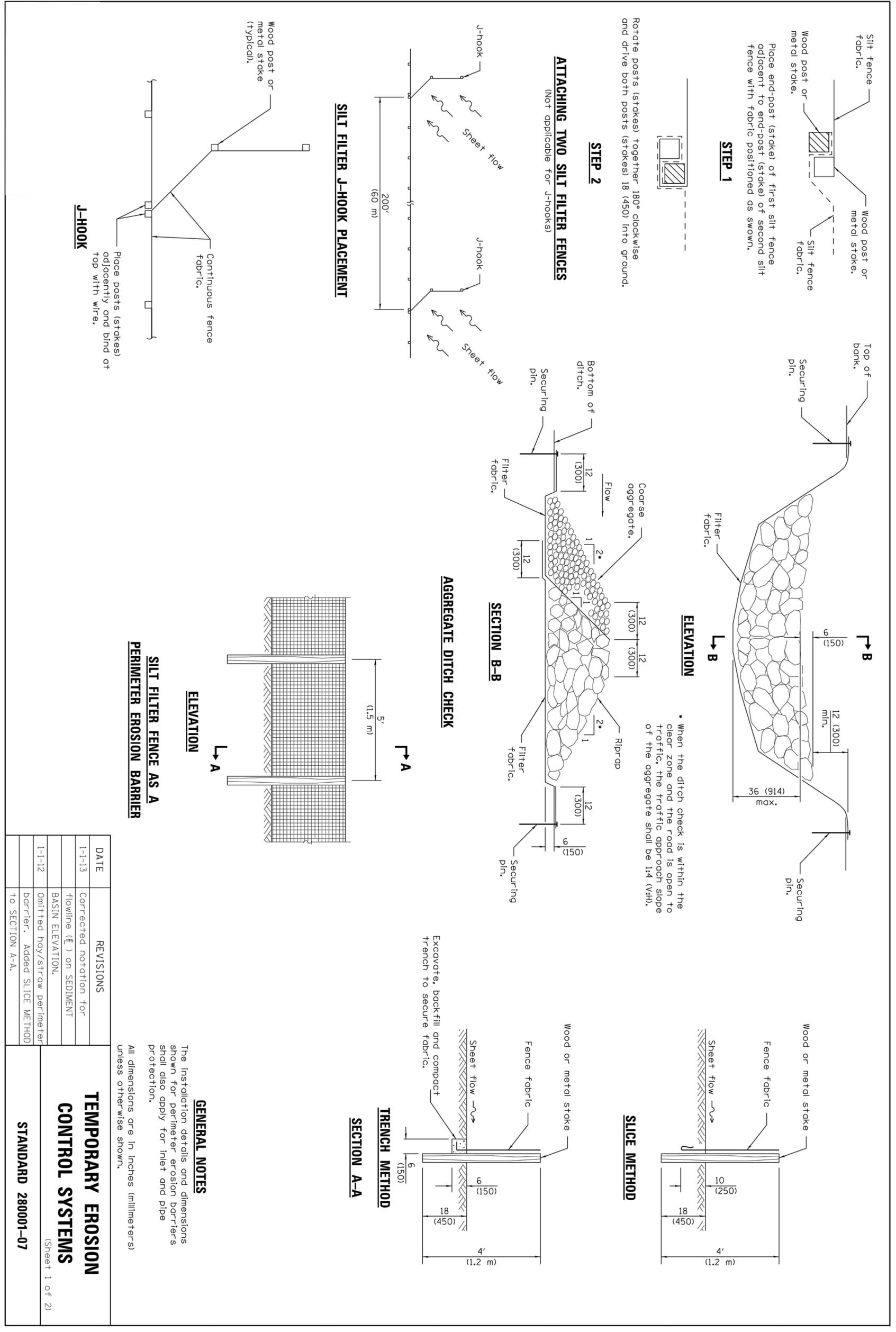
\_\_\_\_\_  
Mailing Address of Individual/Company Phone Number

\* \* \* \* \*

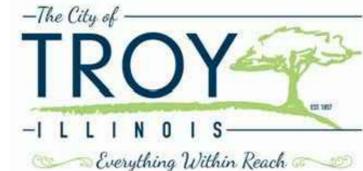
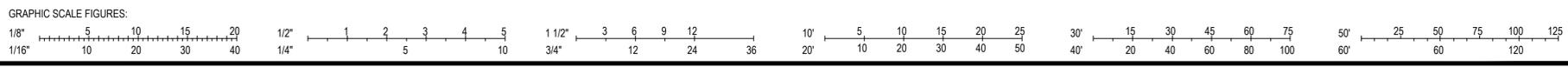
Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

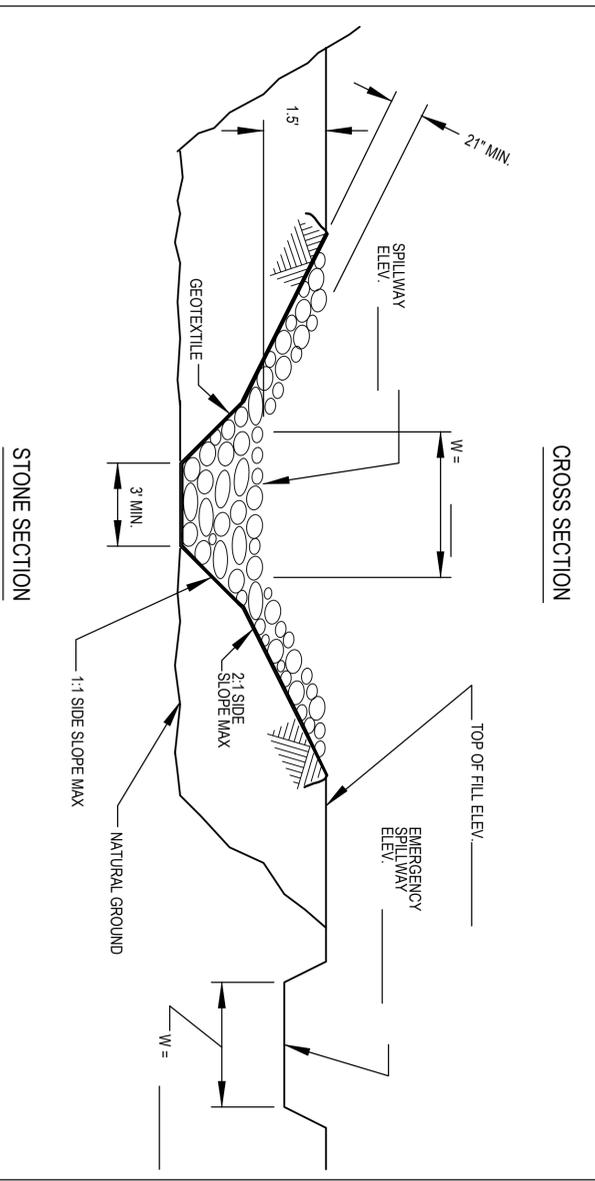
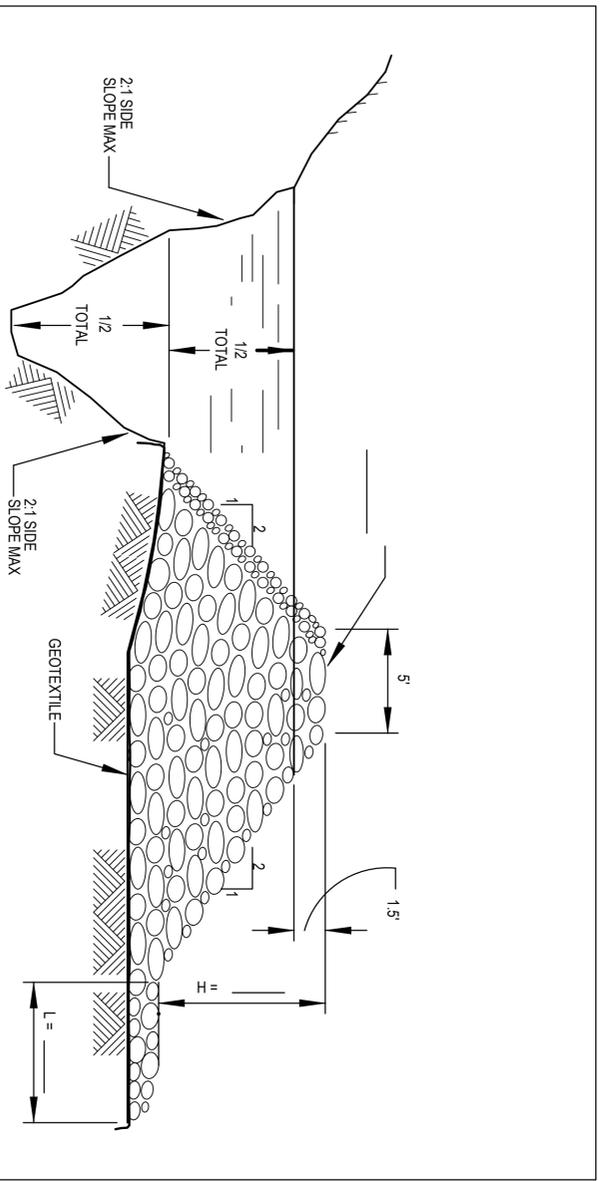
Notary Seal



DATE	REVISIONS
1-1-13	Corrected notation for Flowline (E) on SEDIMENT BASIN ELEVATION.
1-1-12	Omitted hay/straw perimeter barrier. Added SLICE METHOD to SECTION A-A.

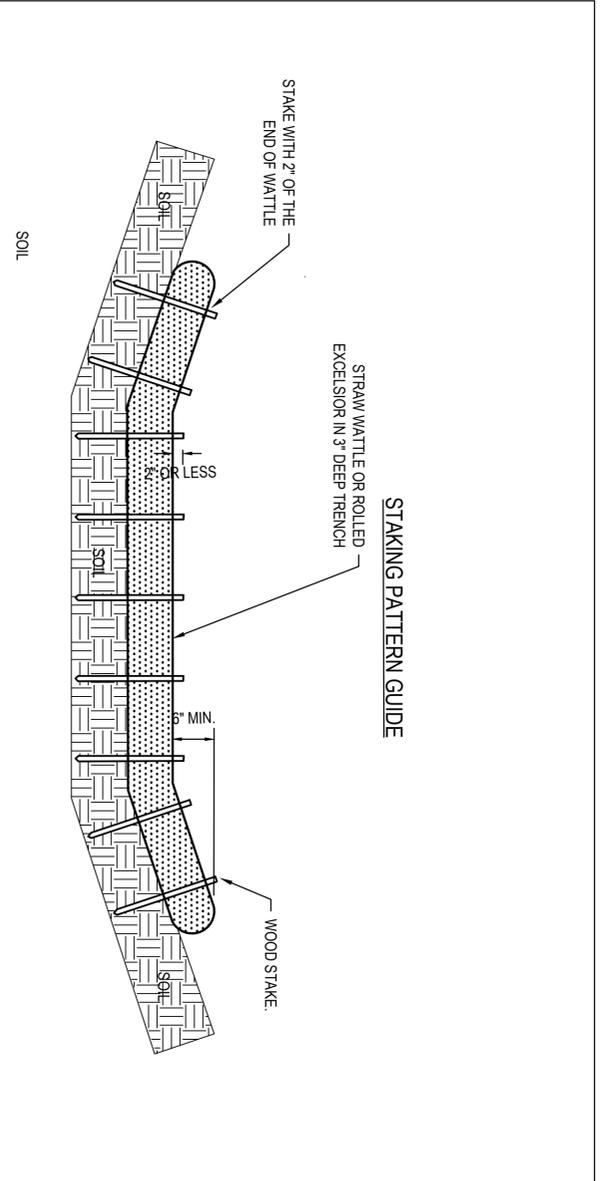


NO.	DATE	REMARKS

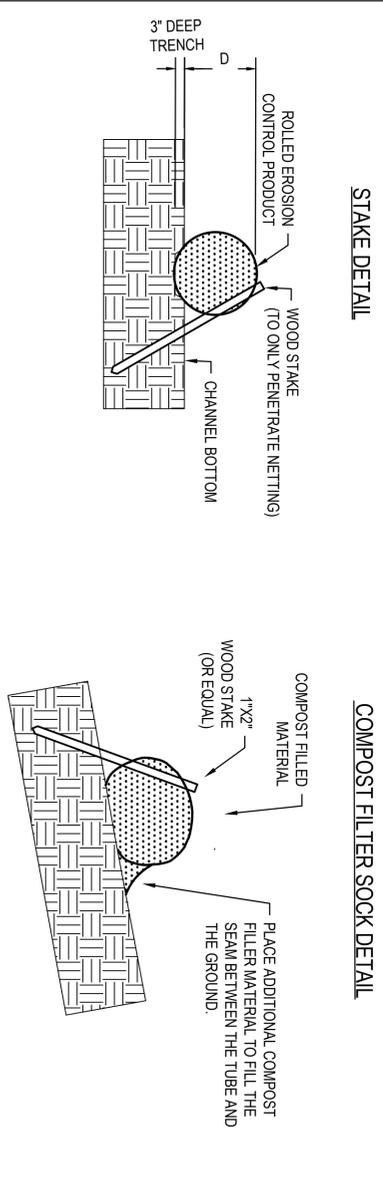


- NOTES:
1. IF THE SEDIMENT POOL IS FORMED OR ENLARGED THE SIDE SLOPE WILL BE 2:1 OR FLATTER.
  2. THE FILL SHALL BE CONSTRUCTED USING IDOT RR-4 STONE SIZE A 1 LAYER OF IDOT CA-2 SHOULD BE PLACED ON THE INSIDE FACE TO REDUCE THE FLOW RATE.
  3. THE ROCK WILL BE PLACED ACCORDING TO CONSTRUCTION SPECIFICATION 25 ROCKFILL. PLACEMENT WILL BE BY METHOD 1 AND COMPACTION WILL BE CLASS III.
  4. THE GEOTEXTILE SHALL MEET THE REQUIREMENTS IN MATERIAL SPECIFICATION 992 GEOTEXTILE TABLE 1 OR 2 CLASS I, II OR IV.

REFERENCE	STANDARD DWG. NO.
Project	IL-660
Designed	SHEET 1 OF 1
Checked	DATE 11-20-01
Approved	

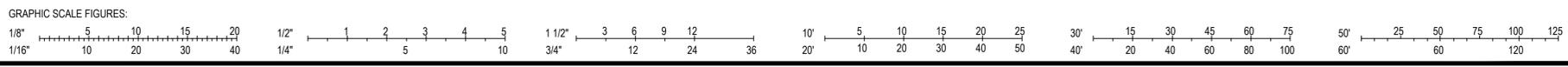


- NOTES:
1. OVERLAP MINIMUM IS THE DIAMETER OF THE ROLL.
  2. 4" SPACING FOR WATTLES.
  3. 2" SPACING FOR ROLLED EXCELISOR.
  4. OR SPACE ACCORDING TO MANUFACTURER'S SPECIFICATIONS.

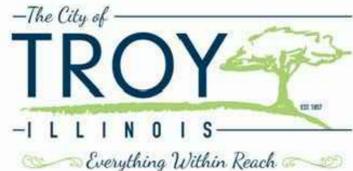


- NOTES:
1. DRAWINGS ARE NOT TO SCALE.
  2. ENDS OF WATTLES OR ROLLED EXCELISOR SHALL BE TURNED AT LEAST 6" UPSLOPE.
  3. RECOMMENDED STAKES ARE 1 1/8" WIDE X 1 1/8" THICK X 30" LONG.
  4. STAKES SHALL NOT EXTEND ABOVE THE STRAW WATTLE MORE THAN 2".
  5. SPACING: THE TOE OF THE UPSTREAM DITCH CHECK SHALL CREATE A HORIZONTAL LINE WITH THE TOP OF THE DOWNSTREAM DITCH CHECK.
  6. WHEN COMPOST FILTER SOCK DITCH CHECK IS USED, PLACE A COMPOST BERM UPSTREAM OF THE FILTER SOCK (SEE IUM 805). A TRENCH IS NOT REQUIRED.

REFERENCE	STANDARD DWG. NO.
Project	IL-514
Designed	SHEET 1 OF 1
Checked	DATE 8-19-11
Approved	



NO.	DATE	REMARKS



CITY OF TROY, ILLINOIS  
 SOIL EROSION AND SEDIMENT CONTROL  
 DETAILS

DATE: 02/22/17  
 SHEET NO.: 4.5