



Kane County Development & Community Services
Building Permit Application

Kane County
Government Center
 719 Batavia Ave Building A
 Geneva, IL, 60134
 (630) 232-3485

Applicant Information:

Application Date: _____ Applicant Name: _____
 Property Address: _____
 Pin/ Tax ID (found on title or tax bill): _____
 Relation to Property: Owner/ Contractor/ Lessee/ Tenant / Other: _____
 Applicant Phone: _____ Applicant Email: _____
 Primary Contact for Building Permit: _____

Property Owner Information:

Check here if applicant is property owner

Name: _____ Phone: _____
 Email: _____
 Mailing Address: _____

Type of general work being requested:

New Construction Remodel/ Alteration Addition Repair Establishment of Use Demolition

Specific type of work being requested:

Accessory Structure	Damage Assessment	HVAC/Water Heater	Solar Panel System
Agricultural Exemption	Deck/ Gazebo /Pavilion	Kitchen/ Bath Remodel	Shed< 200 square feet.
Basement (finished)	EV Charging System	Pool/ Hot Tub/ Spa	Sign
Cell Tower	Electric Service	Privacy Fence	Single Family Residence
Cell Tower Co-Location	Generator	Roof/Siding	Windows/Doors

Type of Building:

Residential Commercial Agricultural Multi-Family Residence

Description of Work:

Project Cost:

New Construction Cost: _____
 Remodel Cost: _____
 Total Cost: _____

New Square Feet:

Above ground: _____
 Basement: _____
 Crawl Space: _____
 Total Sq. Feet: _____

Please check below if applicable:

Private Septic Private Well

Please submit the required permit documents to:
KaneBuildingDeptPermits@KaneCountyIL.Gov
 or
<https://cvportal.kanecountyil.gov/portalserver>

2021 International Residential Code
 2021 International Building Code
 2021 International Existing Building Code
 2021 International Mechanical Code
 2020 National Electric Code
 2021 Illinois Energy Conservation Code
 2014 Illinois State Plumbing Code
 2018 Illinois Accessibility Code

General Contractor Information:

Check here if property owner will be the one doing the work.

Contractor Name: _____ Contractor Phone #: _____

Contractor Email: _____

Contractor Address: _____

Architect Information:

Architect Name: _____ Architect Phone #: _____

Architect Email: _____

Architect Address: _____

Roofing Contractor Information:

Submit Copy of License

Contractor Name: _____ Contractor Phone #: _____

Contractor Email: _____ IL Roofing Contractor License # _____

Contractor Address: _____

Plumbing Contractor Information:

Submit Copy of -055 License

Contractor Name: _____ Contractor Phone #: _____

Contractor Email: _____ IL Plumbing Contractor License # _____

Contractor Address: _____

Electric Contractor Information:

Contractor Name: _____ Contractor Phone #: _____

Contractor Email: _____

Contractor Address: _____

If your Contractor is not listed above please provide information below:

Contractor Name: _____ Contractor Phone #: _____

Type of Contractor: _____

Contractor Email: _____

Contractor Address: _____

In consideration of this application and attached forms being made a part thereof, and the issuance of permit I/We will conform to the regulation set forth on the Kane County Zoning & Building Ordinances. I/We also agree that all work performed under said permit will be in accordance with the building plans and site plan which accompany this application, except for such changes as may be authorized by the Kane County Building Officer.

Signature of Property Owner or Authorized Agent

Printed Name of Property Owner or Authorized Agent

Date Signed & Printed