



**CITY OF HIGHLAND PARK
ELECTRICAL PERMIT APPLICATION**

DEPARTMENT OF COMMUNITY DEVELOPMENT
BUILDING DIVISION
1150 Half Day Rd., Highland Park, IL 60035
(P) 847.432.0808, (F) 847.926.8885
(W) www.cityhpil.com, (E) building@cityhpil.com

PERMIT APPLICATION INSTRUCTIONS

- 1) Provide a description in the box below of your proposed project.
- 2) Complete and sign Page 2 on back.
- 3) Compile copies of all drawings, proposals, licenses, insurance, etc.
- 4) Submit ALL documents with signature(s) to the Building Division.

IMPORTANT NOTES

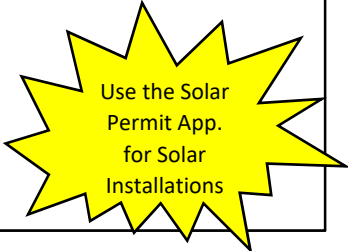
- 1) Visit www.cityhpil.com/building to view submittal requirements and current codes & amendments.
- 2) Incomplete submissions will result in delays.
- 3) Most exterior work will require a separate Tree Removal / Preservation Permit.
- 4) Separate forms required for Solar, Building, Plumbing, Mechanical, Exterior, Fire Alarm, Fire Sprinkler, Tents, Tree Preservation, Obstruction, Right of Way, Signs, Letter of Intent, & Structure Demolition.

Construction Site Address: _____

*****REQUIRED*****

PROJECT DESCRIPTION / NOTES / SCOPE OF WORK

*****REQUIRED*****



Use the Solar
Permit App.
for Solar
Installations

PLEASE SEND PERMIT APPLICATIONS VIA EMAIL TO: building@cityhpil.com

PLEASE SEND INSPECTION REQUESTS VIA EMAIL TO: buildinginspections@cityhpil.com



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Approval _____

Visit www.cityhpil.com/building for submission requirements and a list of adopted codes & amendments.

Construction Site Address: _____ Permit No: _____

PROPERTY OWNER INFORMATION

Name(s): _____ Phone 1: _____

Phone 2: _____
Address: _____ Email 1: _____

Email 2: _____

ELECTRICAL INFORMATION

ELECTRICAL CONTRACTOR

Business Name: _____
Contact Name: _____
Business Address: _____

Office Phone: _____
Mobile Phone: _____
Email: _____
License Number: _____ Exp. Date _____

**Reminder: Include copy of license from testing municipality*

PROJECT DETAIL

New Installation Alter or Repair
 New Service Service Revision Temp. Service
Service Amp Size _____
 Generator Swimming Pool / Hot Tub
 Alternative Energy _____ Kilowatts
 Elevator, Lift, or Hoist

_____ No. of Wire Openings _____ No. of Fixtures
_____ No. of Heating Kilowatts
_____ Electrical Motor Horse Power



INVOICING / SIGN & DATE

Invoice To: Homeowner Applicant/Contractor
Billing Customer Num. (if known): _____
Property Owner: _____
*****ALWAYS REQUIRED*****
Applicant: _____
(If different than property owner)

Sign & Date

INTERNAL USE ONLY

Waiver(s) Required Guarantee Deposit(s) Required
 Historic Floodplain HOA Approval

 In-House Review Third Party Review

Total Permit Fees: \$ _____
Total Deposits: \$ _____
Total Due: \$ _____