



**CITY OF HIGHLAND PARK
PLUMBING 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) Exterior work may require a separate Tree Removal / Preservation / Protection Permit.
- 4) Separate forms required for Building, Electrical, Mechanical, Exterior, Fire Alarm, Fire Sprinkler, Tents, Tree Removal/Preservation, Obstruction, Right of Way, Signs, Letter of Intent, & Structure Demolition.

Construction Site Address: _____

*****REQUIRED*****

PROJECT DESCRIPTION / NOTES / SCOPE OF WORK

*****REQUIRED*****

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: _____

PLUMBING INFORMATION

(If homeowner, submit Homeowner/General Contractor Agreement)

PLUMBING, WATER, & SEWER CONTRACTOR

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

Office Phone: _____
Mobile Phone: _____
Email: _____
License Number: 055-_____ Exp. Date _____

**Reminder: Submit a copy of 055 license(s) with application*

**Reminder: Submit a Letter of Intent that is signed, notarized, or has an official seal with application*

*****REQUIRED PER IL PUBLIC ACT 102-0613*****

IDENTIFY INCOMING WATER SERVICE LINE MATERIAL

- COPPER LEAD
- UNKNOWN GALVANIZED

PROJECT DETAIL (check all that apply)

- New or Alter Plumbing - Number of Fixtures _____
- Lawn Sprinkler - Number of Sprinkler Outlets _____
- Sewer Repair
 Private ROW Sanitary Storm
- Water Heater - New Replacement
- Service Disconnection Required
 Water Sanitary Storm
- Service Taps
 Water Sanitary Storm
- Water Service Tap Size _____
- Water Meter Size _____
- No. of Parkway Openings _____
- No. of Street Openings _____

INVOICING / SIGN & DATE

Invoice To: Homeowner Applicant
Billing Customer Num. (if known): _____

Property Owner: _____
*****ALWAYS REQUIRED*****
Applicant: _____
(If different than property owner)

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: \$ _____

Sign & Date