



PERMIT NUMBER

VILLAGE OF LINCOLNWOOD APPLICATION TO PERFORM ELECTRICAL, H.V.A.C., & PLUMBING WORK

DATE: _____

THE PERMIT ISSUED ON THIS APPLICATION WILL AUTHORIZE ONLY WORK SPECIFIED. CONTRACTOR MUST GIVE COMPLETE INFORMATION AS INDICATED BELOW:

LOCATION OF WORK: _____

NAME OF PROPERTY OWNER: _____ PHONE _____

PERSON, FIRM OR CORPORATION PERFORMING WORK _____ PHONE _____

DESCRIPTION OF WORK BEING PERFORMED:

ELECTRICAL				PLUMBING		
GIVE NUMBER OF LIGHTING CIRCUITS AND OUTLETS					RESIDENTIAL	COMMERICAL
		2 WIRE	3 WIRE			
15 AMP				# OF FIXTURES		
20 AMP				WATER SERVICE		
100 AMP CIRCUIT				METER		
200 AMP CIRCUIT				SEWER USE		
OUTLETS ON				SPRINKLER		
EXISTING				FLOOD CONTROL		
CIRCUITS						
SERVICE				HVAC		
VOLTAGE	PHASE	WIRE	SIZE		CFM/TONS	NUMBER
SERVICE _____				VENTILATION:		
E.M SERVICE _____				SUPPLY		
				EXHAUST		
				HEATING:		
				FURNACES		
				APPLIANCES		
				AIR CONDITIONER		
				CONDENSORS		
				REFRIGERATION:		
				MOTOR/ COMPRES-SOR		

REMARKS: _____

Please call 847-673-7402 to schedule final inspections.

A minimum 24 Hour notice is required

SIGNATURE OF APPLICANT:: _____

APPROVED BY: _____

TOTAL FEE: _____