

# APPLICATION FOR BUILDING PERMIT

Date Received by Regional Office of Education \_\_\_\_\_

Regional Office of Education Assigned Application Number \_\_\_\_\_

DISTRICT NAME		COUNTY
FACILITY NAME		FACILITY LOCATION

- Property is owned by the district       Property **not** owned by district (Attach Authorization by owner)

## PROJECT SCOPE

### COST AND FINANCING

- Less Than \$50,000 but involves like activity  
 More than \$50,000  
 Less than 15% of replacement cost  
 More than 15% of replacement cost but less than 50% of replacement cost  
 More than 50% of replacement cost  
 Fire Prevention and Safety Financing involved

PROJECT NUMBER: \_\_\_\_\_

TOTAL ESTIMATED COST: \$ \_\_\_\_\_

ESTIMATED COMPLETION DATE: \_\_\_\_\_

SOURCE OF ALL FUNDS: \_\_\_\_\_

TOTAL SQUARE FOOTAGE: \_\_\_\_\_

### AREA AFFECTED:

- New area more than 7200 square feet  
 Less than 50% of existing area  
 More than 50% of existing area (sprinkle entire area per 105 ILCS 5/22-23)

FOR HEALTH/LIFE SAFETY  
FUNDING (5¢ LEVY OR BONDS)  
INDICATE:

Amendment number: # \_\_\_\_\_

Item(s): # \_\_\_\_\_

## CATEGORIES OF WORK INVOLVED

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> New building construction | <input type="checkbox"/> Energy conservation    | <input type="checkbox"/> Site work                     |
| <input type="checkbox"/> School building addition  | <input type="checkbox"/> Mechanical (HVAC) work | <input type="checkbox"/> Sprinkler system installation |
| <input type="checkbox"/> Asbestos abatement        | <input type="checkbox"/> Paving                 | <input type="checkbox"/> Structural work               |
| <input type="checkbox"/> Accessibility (ADA)       | <input type="checkbox"/> Plumbing work          | <input type="checkbox"/> Telephone systems (E-911)     |
| <input type="checkbox"/> Electrical work           | <input type="checkbox"/> Security system        | <input type="checkbox"/> Other: _____                  |

## PROJECT DOCUMENTS (Attach two copies of all construction documents)

CONSTRUCTION DOCUMENTS ATTACHED	DATE SUBMITTED
<i>Drawings</i>	
<i>Specifications</i>	
<i>Plan Review Statements</i>	
<i>Confirmation of Plan Review Records</i>	

## ARCHITECT

We hereby certify that this application accurately describes the work to be performed and that, upon approval, all work will be completed to the best of our knowledge in compliance with the Health/Life Safety Code and the Sprinkler Code 5/22, 23 in accordance with this application and all applicable laws and regulations.

(Seal)

License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name and Signature of Architect/Engineer \_\_\_\_\_

Name of Firm \_\_\_\_\_ Phone Number \_\_\_\_\_

## SCHOOL DISTRICT

The Board of Education does hereby approve and adopt said plans and specifications for submission to the Regional Superintendent for review and issuance of a building permit.

Date \_\_\_\_\_ Signature of President, Board of Education \_\_\_\_\_

Date \_\_\_\_\_ Signature of District Superintendent \_\_\_\_\_

The above Application for Building Permit is hereby accepted as submitted. An Application of Occupancy Permit and the **final inspection** are required for the Certificate of Occupancy, and **must be scheduled prior to occupancy of building.**

Date \_\_\_\_\_ Signature of Regional Superintendent \_\_\_\_\_

# PLAN REVIEW STATEMENTS

- A. **Phase I Environmental Study** was conducted on \_\_\_\_\_ as required (or voluntary Illinois Environmental Protection Act [415 ILCS 5/58.16].
- B. **Permit** was obtained from IDNR for **Floodway Construction** on \_\_\_\_\_ [615 ILCS 5/
- C. Illinois **Historic Preservation** Agency was notified on \_\_\_\_\_ to allow for the identification of any historical significance related to the project.[20 ILCS 3420/4]
- D. **Asbestos Notification** was submitted to IDPH) on \_\_\_\_\_ [77 Ill. Adm. Code 855.35
- E. **Sprinkler** Installation Requirements [105 ILCS 5/22-23]
- 1. New area **less than 7200 SF** within any period of 30 months (sprinkler installation **not required**, but shall be protected with fire detection system)
  - 2. New area **more than 7200 SF** within any period of 30 months (sprinkler installation **required**)
  - 3. "Alteration" to **less than 50% of existing** area within any period of 30 months (sprinkler installation **not required**, but shall have fire detection system).
  - 4. "Alteration" to **more than 50% of existing** area within any period of 30 months (sprinkler installation **required**).
- F. Illinois **Accessibility** Code Requirements [71 Ill. Adm. Code 400.510]
- 1. **Less than 15% of the reproduction cost**. The element or space being altered shall comply with applicable requirements for new construction.
  - 2. Alteration costs **more than 15% but less than 50% of reproduction cost and less than \$100,000**. The following shall comply with applicable requirements for new construction: 1) the element or space being altered; and 2) an entrance and means of egress for use by general public.
  - 3. Alterations **more than 15% but less than 50%** of reproduction cost, **and more than \$100,000**. The following shall comply with the applicable requirements for new construction: 1) the element or space being altered; 2) an entrance and means of egress intended for use by the general public; 3) all spaces and elements necessary to provide horizontal and vertical accessible routes between an accessible entrance and means of egress and the element or space being altered. 4) at least one accessible toilet room for each sex or a unisex toilet, when permitted, if toilets are provided or required; 5) accessible parking spaces, where parking is provided; and 6) an accessible route from public sidewalks or from the accessible parking spaces, if provided, to an accessible entrance.
  - 4. Alteration costs **50% or more** of reproduction cost. The entire facility shall comply with applicable requirements for new construction.

## IBPVS Plan Review Statement

2004 OSFM Boiler and Pressure Vessel Safety Rules (41 Ill. Admin. Code 120) Effective September 24, 2004

Construction Documents dated, \_\_\_\_\_, as they relate to the scope of services agreed upon between \_\_\_\_\_ (design professional) and \_\_\_\_\_ (school district) for the \_\_\_\_\_ (project) were reviewed by me and were found to be in compliance with the relevant requirements of the boiler and pressure vessel code listed above.

\_\_\_\_\_  
Design Professional Name

\_\_\_\_\_  
Firm

\_\_\_\_\_  
Design Professional Signature

\_\_\_\_\_  
Date

(Seal)

## IPC Plan Review Statement

2005 Illinois Plumbing Code (77 Ill. Admin. Code 890) Effective April 8, 2005

Construction Documents dated, \_\_\_\_\_, as they relate to the scope of services agreed upon between \_\_\_\_\_ (design professional) and \_\_\_\_\_ (school district) for the \_\_\_\_\_ (project) were reviewed by me and were found to be in compliance with the relevant requirements of the plumbing code listed above.

\_\_\_\_\_  
Design Professional Name

\_\_\_\_\_  
Firm

\_\_\_\_\_  
Design Professional Signature

\_\_\_\_\_  
Date

(Seal)

# APPLICATION FOR APPROVAL OF A VARIANCE

**REFERENCE:** Except as limited by subsection (b)(3) of Section 180.70 23 Illinois Administrative Code, when a requirement or standard set forth in any code incorporated in 23 Illinois Administrative Code Part 180 can be satisfied by an alternative means, a school board may apply for a variance as defined in Section 180.30 of this Part.

NAME AND ADDRESS OF BOARD OF EDUCATION	NAME OF CONTACT	PHONE NUMBER
	COUNTY	FAX NUMBER

NAME OF FACILITY WHICH VARIANCE IS BEING SOUGHT:

1. Indicate the specific rule from which a variance is being sought:

2. Describe the variance being sought:

3. Describe proposed alternative:

4. Describe the basis upon which the board of education is seeking the variance:

5. Indicate the date upon which the board of education adopted a resolution to seek the variance:

6. Include by attachment, the Architect/Engineer's certification, documenting in what particular respects the proposed alternative provides performance or protection equal or superior to that provided by the code requirements from which a variance is sought.

## AUTHORIZATION:

\_\_\_\_\_  
Date Signature of President, Local Board of Education

\_\_\_\_\_  
Date Signature of Secretary, Local Board of Education

\_\_\_\_\_  
Date Signature of District Superintendent

## RECOMMENDATION BY REGIONAL SUPERINTENDENT:

- APPROVE  
 DISAPPROVE

\_\_\_\_\_  
Date Signature of Regional Superintendent

# CONFIRMATION OF PLAN REVIEW RECORDS

2009 International Building Code Plan Review Records

Plan Reviewer Name	Approval to Proceed Date	A/E or Qualified Plan Reviewer Signature	ISBE ID Number or A/E License Number
Comments:			

2009 International Electrical Code (Appendix K) Plan Review Records

Plan Reviewer Name	Approval to Proceed Date	A/E or Qualified Plan Reviewer Signature	ISBE ID Number or A/E License Number
Comments:			

2009 International Energy Conservation Code Plan Review Records

Plan Reviewer Name	Approval to Proceed Date	A/E or Qualified Plan Reviewer Signature	ISBE ID Number or A/E License Number
Comments:			

2009 International Fire Code Plan Review Records

Plan Reviewer Name	Approval to Proceed Date	A/E or Qualified Plan Reviewer Signature	ISBE ID Number or A/E License Number
Comments:			

2009 International Mechanical and Fuel Gas Code Plan Review Records

Plan Reviewer Name	Approval to Proceed Date	A/E or Qualified Plan Reviewer Signature	ISBE ID Number or A/E License Number
Comments:			