Village of Bloomingdale

201 S. Bloomingdale Road
Bloomingdale, IL 60108
www.villageofbloomingdale.org

RESIDENTIAL EXTERIOR DOOR INSTALLATION PERMIT SUBMITTAL REQUIREMENTS

"Growth with Pride"

Building & Zoning Department
buildingandzoning@vil.bloomingdale.il.us
phone: (630) 671-5660
fax: (630) 893-1596

Village Hall Hours
Monday-Friday
8:30 am – 4:30 pm

Minimum Submittal Requirements:

1. Completed application for permit form.
2. Copy of proposal/scope of work.
3. Door installation Instructions (can be found on the manufacturer's website).
4. U-Factor (Energy Details) for door assembly.
5. $10,000 surety bond from door installation company.
6. Homeowners Association approval, if applicable.
7. Permit fee is based on construction cost as is due at permit issuance.

Construction Requirements:

1. Installation shall comply with the 2018 International Residential Code as amended and adopted by the Village Code Title 10, Chapter 3.
2. Installation shall comply with the 2018 Illinois Energy Conservation Code as adopted by Village Code Title 10, Chapter 8.

Inspection Requirements:

1. Rough Framing, Insulation (interior around door jamb), exterior flashing / tape (photographs are acceptable in lieu if field inspection).
2. Final inspection upon completion.

INSPECTIONS REQUIRE 24 HOUR NOTICE
APPLICANT IS RESPONSIBLE FOR SCHEDULING INSPECTIONS

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201 S. Bloomingdale Rd.
Bloomingdale, IL 60108-1487
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Village Hall Hours: Monday thru Friday 8:30AM – 4:30PM

PERMIT NUMBER
PROPERTY ID NUMBER
ZONING DISTRICT
INSPECTOR

Application For Permit

Growth with Pride

IF NEW BUILDING CONSTRUCTION, IT WILL BE UNLAWFUL TO OCCUPY THE PREMISES STATED BELOW UNTIL FINAL INSPECTION HAS BEEN PERFORMED, APPROVED AND CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED.

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ADDRESS OF PROPERTY: _____ DATE: _____

APPLICANT NAME: _____ APP. PHONE: _____

OWNER NAME (IF DIFFERENT FROM ABOVE): _____ OWNER PHONE: _____

OWNER ADDRESS (IF DIFFERENT THAN ABOVE): _____

PHONE # TO CONTACT WHEN PERMIT READY: _____

CONTACT EMAIL: _____

TYPE OF PERMIT: _____ CONSTRUCTION COST: $_____

☐ RESIDENTIAL ☐ BUSINESS ☐ INDUSTRIAL/MANUFACTURING; BUILDING OR STRUCTURE SQUARE FEET: _____

	CONTRACTOR NAME:	**ADDRESS:**	**PHONE:**
ARCHITECT:			
GEN'L CONTR:			
CONCRETE CONTR:			
CARPENTER:			
MASON:			
PLUMBER:			
ROOFER:			
ELEC. CONTR:			
MECH./ELEV. CONTR:			
FIRE PROT. CONT:			

The undersigned hereby applies to the Village of Bloomingdale, Illinois for a permit herein described and if granted, the applicant shall comply with all requirements of the Village Ordinances relating thereto and pay the fees required including any past due monies due to the Village, including, but not limited to any water and sewer rate charges associated with the above Address of Property. Permits are valid for 12 months, if construction has commenced and 6 months, if work has not been started. You may be subject to additional permit fees after expiration date to extend a permit. No error or omission in either the plans or application, whether or not the plans or application have been approved by the Building Official, shall permit or relieve the applicant from constructing the work in any other manner than that provided for in the Ordinances of this Village relating thereto. **ANY BOND MONIES NOT RETURNABLE OR NOT REQUESTED FOR RETURN WITHIN ONE YEAR OF FINAL INSPECTION APPROVAL OR CERTIFICATE OF OCCUPANCY ISSUANCE WILL BE FORFEITED TO THE VILLAGE OF BLOOMINGDALE**

_____
SIGNATURE OF AGENT OR OWNER

PERMIT ISSUED BY_____
BUILDING COMMISSIONER

_____
PRINT NAME

DATE PERMIT ISSUED: _____

PERMIT FEES: $_____ PAID ☐

PLAN REVIEW FEES: $ _____ PAID ☐

RECEIPT NO.: _____

****24-HOUR NOTICE REQUIRED FOR ALL INSPECTIONS****

THE APPLICANT AGREES TO PAY ALL PLAN REVIEW FEES UPON PERMIT SUBMITTAL. FEES PAID ARE NON-REFUNDABLE.