



**VILLAGE OF SKOKIE**

**APPLICATION FOR ACCESSORY  
STRUCTURE PERMIT**

<b>For office use only:</b> Project # _____ Date Received: _____
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Community Development Department  
 Building Division 1<sup>st</sup> Floor  
 5127 Oakton Street – Skokie, IL 60077  
 Phone (847) 933-8223 - Fax (847) 933-8230

**PROPERTY ADDRESS** \_\_\_\_\_ **Tax Parcel #** \_\_\_\_\_

**\*OWNER OF PROPERTY** \_\_\_\_\_ (First name Last Name)  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Mobile \_\_\_\_\_  
 Email \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Driver's License or State ID # \_\_\_\_\_ State \_\_\_\_\_

\*If more than one owner please list the primary contact above and secondary contact below

**OWNER OF PROPERTY** (Secondary Contact) \_\_\_\_\_

Who do we contact if we have questions about your application? Owner  Contractor

Who is paying for the permit? Owner  Contractor

**COMPLETE THE FOLLOWING FOR ALL TRADES THAT APPLY TO THIS CONSTRUCTION.**

**GENERAL CONTRACTOR** \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**CARPENTRY CONTRACTOR** \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**ELECTRIC CONTRACTOR** \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**EXCAVATOR/CEMENT/MASONRY CONT** \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_

**WORK DESCRIPTION**

\_\_\_\_\_ Detached Garage \_\_\_\_\_ Shed  
 \_\_\_\_\_ Parking Lot/Pad \_\_\_\_\_ Deck  
 \_\_\_\_\_ Sidewalk/Driveway \_\_\_\_\_ Fence

**FENCE:** Approximate Length \_\_\_\_\_ Height(s) \_\_\_\_\_

**TOTAL VALUE OF WORK:** \$ \_\_\_\_\_

This is an application only. Completion of this application does not entitle the commencement of construction. The applicant agrees to conform to all applicable laws of the Village of Skokie and when permit is approved also agrees that all work performed will be in accordance with the plans and specifications set forth in the approved permit. Work area cannot be occupied until final inspection approval.

**PROPERTY OWNER SIGNATURE (Primary)** \_\_\_\_\_ **Date** \_\_\_\_\_

**THE FOLLOWING ITEMS MUST BE SUMITTED WITH YOUR APPLICABLE APPLICATION TYPE.  
STAFF WILL NOT ACCEPT YOUR APPLICATION IF IT IS INCOMPLETE.**

**FENCE PERMIT**

- \_\_\_ APPLICATION FORM COMPLETE WITH ALL REQUIRED INFORMATION & SIGNATURES.
- \_\_\_ 1 COPY - PLAT OF SURVEY TO SCALE (SHOWING ALL EXISTING IMPROVEMENTS TO PROPERTY)
- \_\_\_ 2 COPIES - SITE PLAN\* (SHOWING LOCATION OF FENCE)

**SIDEWALK/DRIVEWAY PERMIT**

- \_\_\_ APPLICATION FORM COMPLETE WITH ALL REQUIRED INFORMATION & SIGNATURES
- \_\_\_ 1 COPY - PLAT OF SURVEY TO SCALE (SHOWING ALL EXISTING IMPROVEMENTS TO PROPERTY)
- \_\_\_ 2 COPIES – SITE PLAN\* (SHOWING PROPOSED SIDEWALK/DRIVEWAY LOCATION OR AREA BEING REPLACED – SQUARE FOOTAGE MUST BE SHOWN ON SITE PLAN)

**SHED PERMIT**

- \_\_\_ APPLICATION FORM COMPLETE WITH ALL REQUIRED INFORMATION & SIGNATURES
- \_\_\_ 1 COPY - PLAT OF SURVEY TO SCALE (SHOWING ALL EXISTING IMPROVEMENTS TO PROPERTY)
- \_\_\_ 2 COPIES – SITE PLAN\* (SHOWING PROPOSED SHED LOCATION/SETBACKS ETC)

**DECK PERMIT**

- \_\_\_ APPLICATION FORM COMPLETE WITH ALL REQUIRED INFORMATION & SIGNATURES
- \_\_\_ 1 COPY - PLAT OF SURVEY TO SCALE (SHOWING ALL EXISTING IMPROVEMENTS TO PROPERTY)
- \_\_\_ 2 COPIES – SITE PLAN\* TO SCALE (SHOWING PROPOSED DECK LOCATION)
- \_\_\_ 2 COPIES – CONSTRUCTION DRAWINGS FOR DECK (FRAMING PLAN, PIER LOCATION/DEPTH, ELEVATION)

**DETACHED GARAGE**

- \_\_\_ APPLICATION FORM COMPLETE WITH ALL REQUIRED INFORMATION & SIGNATURES
- \_\_\_ 1 COPY – PLAT OF SURVEY TO SCALE (SHOWING ALL EXISTING IMPROVEMENTS TO PROPERTY) PLAT CANNOT BE MORE THAN 2 YEARS OLD FROM APPLICATION DATE
- \_\_\_ 2 COPIES – SITE PLAN\* TO SCALE (SHOWING PROPOSED GARAGE LOCATION/SETBACKS ETC)
- \_\_\_ 2 COPIES – CONSTRUCTION DRAWINGS FOR GARAGE (ELEVATION, WALL SECTION, CONCRETE DETAIL)
- \_\_\_ 1 COPY - COMPLETED ZONING INFORMATION WORKSHEET - SITE CALCULATIONS WITH IMPERVIOUS COVERAGE AND FLOOR AREA RATIO CALCULATIONS

**\*SITE PLANS CAN BE DRAWN ON AN EXTRA COPY OF THE PLAT OF SURVEY**

**Please review the Contractor Registration Form for updated registration requirements.**

**All inspections require a minimum advanced notice of 24 hours. Please call (847) 933-8223 to schedule an inspection.**