



Building & Life Safety Department  
Village of Arlington Heights  
33 S. Arlington Heights Rd.  
Arlington Heights, IL 60005  
Phone (847) 368-5560  
Fax (847) 368-5975  
Website: [www.vah.com](http://www.vah.com)

## **Air Conditioner – Residential (Side Yard Installations)**

### **Submittal Process and Checklist**

#### **APPLYING FOR PERMITS:**

All materials to be submitted via email to: [Building@vah.com](mailto:Building@vah.com) You will receive an email notification within 24 hours that your email has reached our in-box. If you do not receive one, contact us at 847-368-5560.

#### **APPLICATIONS AND FORMS REQUIRED:**

The applications and forms that you need to submit are listed on the next page of this checklist. Please be sure to fill these out completely. Incomplete, illegible or lack of information, can delay your permit from being processed.

\* If you are the homeowner and doing the work yourself, please fill out and submit the Homeowner as General Contractor form with your applications. This form can be found at [WWW.VAH.COM](http://WWW.VAH.COM).

#### **CONTRACTOR LICENSE:**

Village of Arlington Heights Contractor license number must be listed on the permit applications. They can be looked up on the Village of Arlington Heights web-site provided below:

[https://www.vah.com/village\\_services/permits\\_and\\_licenses](https://www.vah.com/village_services/permits_and_licenses)

#### **REVIEW TIMEFRAMES:**

Please allow 10 working days for the plan review. Each revision or re-submittal can take an additional 10 working days.

#### **PROCESSING NOTIFICATIONS:**

When reviews are completed, if approved, you will receive a pick-up notification. If a correction or revision is required, you will receive plan review comments. When submitting revisions/corrections, please provide detailed written response of the changes.

#### **FEES:**

The fee for air conditioner installation is \$40.00.

Once payment is received, your plans and permit placard will be emailed to the applicant within 24 hours. Please print the plans and permit placard and have available at the site for inspection.

#### **INSPECTIONS:**

Inspections are required; please call 847-368-5560 at least one day in advance to schedule your inspection. The **permit number** and **project address** are required when scheduling.

**Applications, Forms and Other Materials to be supplied for the following type of project:**

Air Conditioner – Residential (Side Yard Installations)

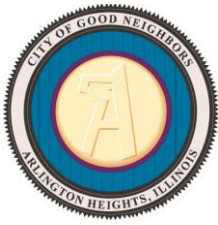
Supply those items marked below to ensure your submittal is complete. Fill out all forms clearly and accurately.

**Applications Required:**

- Building Permit Application

**Materials to be Submitted (one set of each of the indicated items):**

- Contractor's Proposal explaining the scope of work to be performed.
- Plat of Survey - indicate distance to side yard lot line:
  1. Installations in the side yard are subject to review by Planning and Community Development: 10% side yard area must be maintained.



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# BUILDING PERMIT APPLICATION

Indicate application type: **New Application** \_\_\_\_\_

**Addendum** \_\_\_\_\_

**Value of Work: \$ (New)** \_\_\_\_\_

**Value of Work: \$ (Addendum)** \_\_\_\_\_

**Job Address:** \_\_\_\_\_

**Real Estate #:** \_\_\_\_\_

**New Sq. Footage:** \_\_\_\_\_

**Project – Select all that apply**

- |                                                           |                                                        |                                                    |                                                   |
|-----------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> A/C (Single Family)              | <input type="checkbox"/> Demolition (Single Family)    | <input type="checkbox"/> Grading                   | <input type="checkbox"/> Re-roof (Single Family)  |
| <input type="checkbox"/> A/C (Comm): Units ____ Tons ____ | <input type="checkbox"/> Drainage - Landscaping        | <input type="checkbox"/> Hot Tub / Spa             | <input type="checkbox"/> Retaining Wall           |
| <input type="checkbox"/> Apron                            | <input type="checkbox"/> Drain Tile - Building         | <input type="checkbox"/> Kitchen Remodel           | <input type="checkbox"/> Shed / Gazebo            |
| <input type="checkbox"/> Basement Remodel                 | <input type="checkbox"/> Driveway                      | <input type="checkbox"/> Multi-family Addition     | <input type="checkbox"/> Single Family – Addition |
| <input type="checkbox"/> Basketball Pole                  | <input type="checkbox"/> Early Start                   | <input type="checkbox"/> Multi-family(New)         | <input type="checkbox"/> Single Family - Interior |
| <input type="checkbox"/> Bathroom Remodel                 | <input type="checkbox"/> Elevator (Mod)                | <input type="checkbox"/> New Water / Sewer Connect | <input type="checkbox"/> Single Family (New)      |
| <input type="checkbox"/> Boiler                           | <input type="checkbox"/> Elevator – No. of Floors ____ | <input type="checkbox"/> Parking Lot               | <input type="checkbox"/> Site Clearing            |
| <input type="checkbox"/> Commercial Addition              | <input type="checkbox"/> Facade                        | <input type="checkbox"/> Patio                     | <input type="checkbox"/> Site Improvement         |
| <input type="checkbox"/> Commercial Alteration            | <input type="checkbox"/> Fireplace                     | <input type="checkbox"/> Pergola                   | <input type="checkbox"/> Solar Panel Installation |
| <input type="checkbox"/> Commercial (New)                 | <input type="checkbox"/> Foundation Repair             | <input type="checkbox"/> Pool (In-ground)          | <input type="checkbox"/> Stoop                    |
| <input type="checkbox"/> Chimney                          | <input type="checkbox"/> Foundation Start              | <input type="checkbox"/> Pool (Above Ground)       | <input type="checkbox"/> Temporary Trailer        |
| <input type="checkbox"/> Crawl Space Conversion           | <input type="checkbox"/> Furnace                       | <input type="checkbox"/> Pool (Demo)               | <input type="checkbox"/> Water upgrade            |
| <input type="checkbox"/> Deck / Porch                     | <input type="checkbox"/> Garage                        | <input type="checkbox"/> Private Walks             | <input type="checkbox"/> Windows (Commercial)     |
| <input type="checkbox"/> Demolition (Commercial)          | <input type="checkbox"/> Garage Addition               | <input type="checkbox"/> Public Walk               | <input type="checkbox"/> Windows (Multi Family)   |
| <input type="checkbox"/> Demolition (Garage)              | <input type="checkbox"/> Garage Floor                  | <input type="checkbox"/> Re-roof (Commercial)      | <input type="checkbox"/> Windows (Single Family)  |
| <input type="checkbox"/> Demolition (Interior)            | <input type="checkbox"/> Generator                     | <input type="checkbox"/> Re-roof (Multi Family)    | <input type="checkbox"/> Other _____              |

**Specific Scope of Work:** \_\_\_\_\_

**IMPORTANT – PLEASE READ**

Does this project have multiple contractors?  Yes  No

If Yes, this application must be accompanied by the Contractor List.

I, the applicant, certify that I have the proper authority to apply for this permit, to list the contractor provided below, and that all information provided is complete and accurate to the best of my knowledge.

**Date:** \_\_\_\_\_ **Applicant's Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Applicant's Email:** \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Contractor's VAH License #** \_\_\_\_\_

**Contractor's Address:** \_\_\_\_\_ **Contractor's Email:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Owner of Property:** \_\_\_\_\_ **Owner's Phone:** \_\_\_\_\_