



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

New Water / New Sewer Services

Submittal Process and Checklist

APPLYING FOR PERMITS:

All materials to be submitted via email to: 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.

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

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:

Fees are not pre-set based on project type. The pick-up notification packet will show the detailed permit cost for the project.

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:

New Water / New Sewer Services

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

Applications Required:

- Building Permit Application
- Plumbing Permit Application (if applicable) (include Letter of Intent and IDPH "055" license)

Forms Required:

- Contractor List *(if more than one contractor)*
- New Water and Sewer Acknowledgment
- Well & Septic Tank Acknowledgment

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

- Plat of Survey showing new 1 1/2 " new water line on plan with 10 ft separation between sewer and water line.
- Contractor's Proposal explaining the scope of work to be performed.
- Project specific materials:
 1. Notation on Plat as to whether the existing private water well is being sealed or kept.
If well is being sealed, a copy of the well driller's sealing log is required.
Location of the RPZ (if applicable)

Requirements available for Reference:

- Engineering Plan Review Requirements



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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:** _____



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APPLICATION FOR PLUMBING AND SEWER WORK

Indicate application type: New Application _____
 Addendum _____

DATE: _____ **ADDRESS OF WORK TO BE DONE:** _____

OWNER OF PROPERTY: _____

PLUMBING CONTRACTOR'S COMPANY NAME: _____

CONTRACTOR'S NAME: _____ **CONTRACTOR'S E-MAIL:** _____

CONTRACTOR'S PHONE #: _____ **CONTRACTOR'S CELL PHONE #:** _____

CONTRACTOR'S ADDRESS: _____

CONTRACTOR'S CITY: _____ **STATE:** _____ **ZIP CODE:** _____

STATE OF IL PLUMBING REGISTRATION # (055): _____

(INDICATE NUMBER OF NEW FIXTURES)

- | | | | |
|-------------------|-------------------|-----------------------|----------------------------|
| ___ BATH TUB | ___ WATER CLOSETS | ___ DRINKING FOUNTAIN | ___ SEWER REPAIR/CLEAN OUT |
| ___ SHOWERS | ___ WATER HEATER | ___ MOP BASIN | ___ FLOOD CONTROL SYSTEM |
| ___ LAVATORY | ___ DISHWASHER | ___ PREP SINKS | ___ BACK FLOW PREVENTER |
| ___ KITCHEN SINKS | ___ FLOOR DRAIN | ___ WATER CONNECTION | ___ GREASE TRAP |
| ___ HAND SINK | ___ URINALS | ___ EJECTOR PUMP | ___ LAWN SPRINKLERS |
| ___ LAUNDRY TRAY | ___ TRIPLE SINKS | ___ WASH MACHINE | ___ DOWNSPOUTS (Internal) |

MISCELLANEOUS: _____

IN CONSIDERATION OF THE ISSUE AND DELIVERY BY THE BUILDING & LIFE SAFETY DEPARTMENT OF THE VILLAGE OF ARLINGTON HEIGHTS OF THE ABOVE PERMIT, APPLICANT AGREES TO ALL OF THE PROVISIONS OF THE PLUMBING CODE AND ALL STATE LAWS PERTAINING TO BUILDING AND AGREES TO SAVE, INDEMNIFY, AND KEEP HARMLESS THE VILLAGE OF ARLINGTON HEIGHTS, ITS OFFICERS AND EMPLOYEES AGAINST ALL LIABILITIES, JUDGEMENTS, COSTS AND EXPENSES.

EVERY PLUMBING PERMIT APPLICATION MUST BE ACCOMPNIED BY A COPY OF THE STATE OF ILLINOIS PLUMBING CONTRCTOR LICENSE AND LETTER OF INTENT AT THE TIME OF APPLICATION SUBMISSION.

SIGNATURE OF LICENSED PLUMBER

OFFICE USE ONLY

PERMIT NO: _____

FEE: _____

TOTAL NO. OF FIXTURES _____

SIGNATURE OF PLUMBING INSPECTOR

**PLUMBING CONTRACTOR'S
EXAMPLE LETTER OF INTENT**

- Letter must be on company letterhead.
- If company is incorporated, letter must have corporate seal.
- If company is not incorporated, letter must be notarized.

Date: _____

Project Address: _____
Arlington Heights, Illinois

To Whom It May Concern:

It is the intent of _____ to perform the
(Name of Company)

(Description of Plumbing Work)

per the Arlington Heights and State of Illinois Plumbing codes at the above address in the Village of
Arlington Heights as a subcontractor for _____.
(Name of General Contractor)

Name of Company: _____

Company Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

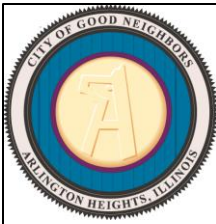
Contact Number: _____

State of IL Plumbing Registration # (055): _____

Signature of Licensed Plumber: _____

Name of Licensed Plumber: (Print) _____

((225 ILCS 320/37) (from Ch. 111, par. 1135) A letter of intent shall be included with all plumbing permit applications. The letter shall be written on the licensed plumber of record's business stationery and shall include the license holder's signature and, if the license holder is incorporated, the license holder's corporate seal. If the license holder is not incorporated, the letter must be notarized.



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NEW WATER & SEWER CONNECTIONS ACKNOWLEDGMENT

NEW WATER

- ✓ Minimum size for new water service is 1 1/2".
- ✓ All water service piping shall meet State of Illinois Plumbing Code requirements .
- ✓ Water service shall have a minimum ground cover of 5 foot 6 inches (5' 6")".
- ✓ Water meter size shall be determined by the Plumbing Inspector and the Director of Public Works based upon water service fixture units as indicated in the Illinois State Plumbing Code.
- ✓ Water service shall be installed with an IPS flared ball valve, and threaded connection before and after water meter. Installation of a ball valve will be required after water meter. " Install drip valve between water meter and 2nd ball valve. **All underground water service piping shall be back-filled with a minimum of 12" of sand.**
- ✓ Water service passing through or under more than one foundation wall shall be protected by a sleeve of a minimum size of 2 sizes larger than water service size.
- ✓ A temporary meter spread shall be installed at connection of the Village of Arlington Heights water service to water distribution system.
- ✓ Water taps will be scheduled with the Public Works Department directly at (847) 368-5800. Water tap inspections shall also be scheduled for Plumbing and Engineering by calling the Building & Life Safety Department at (847) 368-5560.
- ✓ The water meter shall be installed within seven days after installation of water service. Contact the Public Works Department at (847) 368-5800 to schedule water meter installation.

NEW SEWER

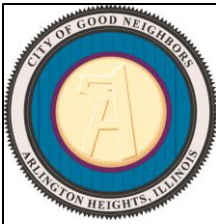
- ✓ Sewer service passing through or under foundation wall shall meet the requirements of the Illinois State Plumbing Code 2014 Section 890.1150A (2).
- ✓ The building drain shall extend a minimum of 5foot (5') outside of foundation wall.
- ✓ The building sewer shall be SDR-26 with SDR-26 fitting. Section 890.1150A (1).
- ✓ All sewer services passing over water service/water main shall meet or exceed the Illinois State Plumbing Code requirements. Section 890.1150B (1, 2, 3).
- ✓ All connections between dissimilar piping shall be made with non-shear couplings.
- ✓ All sewer clean outs shall be at grade elevation.
- ✓ Coring machine shall be used for new sewer connection to main sewer.
- ✓ **If sewer repair is within 10 feet of water service line, PVC Schedule 40 pipe and solvent joints are required. Section 890.1150A (2)**

Inspections made in the street or public right-of-way will be made by the Engineering Department and the Building & Life Safety Department at (847) 368-5560.

The undersigned has read and understands the information provided in this informational handout, and agrees to comply with all applicable Village codes.

Date: _____ Signature: _____ Print Name: _____

Title: _____ Job Address: _____



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WELL & SEPTIC TANK ACKNOWLEDGMENT

PRIVATE WATER WELLS

REQUIREMENTS FOR KEEPING A WELL

- ❖ A reduced pressure principle backflow device (RPZ) shall be installed on the domestic water service piping supplied by the Village of Arlington Heights.
- ❖ The RPZ and water meter shall be purchased from the Village of Arlington Heights and be installed by the Village of Arlington Heights. The plumber shall provide a meter/RPZ spread for the installation of both devices.
- ❖ Air gap drainage shall be drained to a floor drain or a sump pit. **All piping & installation of air gap drainage shall be performed by licensed plumbing contractor.**
- ❖ An expansion tank at the water heater shall be supplied & installed by a licensed plumbing contractor.
- ❖ The complete installation of an expansion tank, air gap drainage, RPZ & water meter shall be completed within 30 days after the completion of installation of new water service.
- ❖ The RPZ shall be tested annually. This test can be done by the Village of Arlington Heights and scheduled by calling the Public Works Department at (847) 368-5800.
- ❖ Failure to complete the installation and testing procedure within 30 days will result in the termination of domestic water service.

SEALING PROCEDURE

- ❖ Water wells shall be sealed within 30 days after the well is no longer in use.
- ❖ Water wells must be sealed **prior** to demolition of structures.
- ❖ Failure to seal the well within 30 days will result in termination of the domestic water supplied by the Village of Arlington Heights.
- ❖ Water wells shall be sealed by a licensed water well driller in compliance with the Illinois Water Well Construction Code.
- ❖ The sealing shall be witnessed by the Village of Arlington Heights and the Cook County Department of Public Health (CCDPH). Call (847) 368-5762 to schedule an inspection with the Village of Arlington Heights and (847) 818-2843 to schedule CCDPH. **Scheduling must occur with a minimum of 48 hours prior to sealing.**

SEPTIC TANKS

- ❖ Septic tanks shall **not** be abandoned prior to the public sewer connection being completed and approved.
- ❖ Septic tanks shall be abandoned **prior** to demolition of structures.
- ❖ Septic tanks no longer in use shall be properly abandoned within 10 days of the public sewer connection being completed and approved.
- ❖ Septic tanks shall be completely pumped by a licensed sewage transporter. The floor and walls shall be cracked or crumbled so the tank will no hold water and the tank shall be filled with sand, crushed stone or soil. If the tank is removed from the ground, the excavation shall be filled with soil.
- ❖ The Village of Arlington Heights shall witness that the tank is completely empty and that the abandonment is done properly. Call 847-368-5762 to schedule this inspection. **Scheduling must occur at least 48 hours prior to pumping of the tank.**

The undersigned has read and understands the information provided in this informational handout, and agrees to comply with all applicable Village codes.

Date: _____ **Signature:** _____ **Print Name:** _____

Title: _____ **Job-Site Address:** _____

**VILLAGE OF ARLINGTON HEIGHTS
CONTRACTOR LIST**

Job Address: _____

Permit #: _____

**IT IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR TO ENSURE ALL CONTRACTORS ARE PROPERLY LICENSED,
LOCALLY AND AT STATE LEVEL**

	Name	Address	Phone	License Number
Owner:				
Architect:				
General:				
Electrical:				
Plumbing:				
Fire Alarm:				
Roofer:				
Air Cond.:				
Mason:				
Carpenter:				
Conc. Paver:				
Steel Erect.:				
Drywall/Plaster:				
Excavator:				

Fireplace:				
Flooring:				
Heating:				
Insulation:				
Landscaper:				
Painter:				
Sheet Metal:				
Stair Builder:				
Tank Installer:				
Tile:				
Venting:				
Hood & Duct:				
Smoke Evac.:				
Sprinkler:				
Other:				
Other:				
Other:				

All Contractors must be licensed prior to the issuance of the permit
Contractor's license must remain valid through duration of the construction project.
