City of St. Charles Generator



Building & Code Enforcement Division 2 East Main Street St. Charles IL 60174 630.377.4406 (Office) http://www.stcharlesil.gov permits@stcharlesil.gov

Please direct any and all questions to the City of St. Charles Building & Code Enforcement Division: Monday through Friday (8 AM to 4:30 PM) at 630.377.4406

A building permit is required prior to installing a back-up or roof top generator.

Check List for Submittal of Application:

- ☐ Is your property located in the Historic Preservation District? If yes, you must complete the Certificate of Appropriateness for this project. The Historical Preservation Commission will review this project at a scheduled meeting.
- □ One (1) Copy Building Permit Application Completely Filled Out.
- □ One (1) Copy Electric Service Application Completely Filled Out.
- □ Four (4) Copies of a Plat of Survey-indicate the location of the proposed generator with the electric panel and gas lines indicated on the Plat.
- Two (2) Sets of manufacturer specifications on the generator.
- □ Submittal/Permit fee of \$250.00 to be submitted at the time of the submittal of the application. Payment may be made by Cash, Check or Credit Card. Credit cards may only be accepted in our office. Applications will not be accepted for review without payment.
- ☐ Homeowner's Association Approval Letter, where applicable.

*Applications missing submittal items will not be accepted.

Building Codes:

The following are the Building Codes, which the City of St. Charles has adopted:

- St. Charles Municipal Code
- o 2020 National Electric Code
- 2021 International Residential Code
- o 2021 International Fuel Gas Code
- o 2021 International Energy Conservation Code

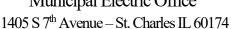
Zoning Requirements:

- o Generators are allowed in interior and rear yards only.
- o Generators must be located a minimum five feet from all lot lines.
- o Generators are not allowed in easements of any type.

Call (630) 377-4406 to schedule Building Inspections at least 24-48 hours before the inspection is needed. Inspections will be scheduled based on availability.

Call J.U.L.I.E. (811) or (800) 892-0123 Before you Dig- prior to any digging to locate any underground utilities.

City of St. Charles Municipal Electric Office





1405 S 7th Avenue – St. Charles IL 60174 630/377-4407

Electric Service Application – New Service/Upgrade/Other

(Each individual service will require a complete and separate application) Name: Original Signature: Contact Name: Phone: Email Address: Application Date:_____ Requested Service Date: sting Building

Residential
Commercial
Street Lights
Residential: Multi Family
Industrial
Traffic Signals
Service
Relocate Service
Relocate Service
Relocate
Signage Lights
Solar-Wind-Generator

Street Lights
Residential: Multi Family
estimated # of units
Commercial
Commercial: Multi Family
estimated # of units
Industrial
Other
Propo **Existing Building New Building** Other Service Voltage Requested ____ Residential ____ Single Phase 120/240 ____ Three Phase ____ 120/208 ____ 277/480 ____ Other Proposed Generator kW _____ Service Panel: Proposed Rating (amps) ______ Proposed Connected kW _____ Present Rating (amps)_____ Present Peak kW (Demand)_____ Estimated Peak kW (Demand)______ Proposed Interconnected kW AC ____ SERVICE ADDRESS (A complete and accurate service address is required before service may be installed) Lot #_____Real Estate Permanent Tax #____ Legal Description (attach sheet if necessary): Record Titleholder of property: If property is held in trust, identify beneficial owner (s): Address: CUSTOMER BILLING INFORMATION (This information will be used for utility billing purposes) Street Address: City/State/Zip_____ Phone: Authorized representative or agent:

Title:

Note: Only Cash or Check can be used for payment.

Phone:

	BUILDING	DIVISION OFFICE USE	
Application Accepted By:		Date Application Received:	
Date Payment Received:		Method of Payment:	
Building Permit No.:			
	ELECTRIC D	EPARTMENT CHARGES	}
Charges Calculated by:		Date:	
<u>ITEM</u>	ACCOUNT #	CHARGES (\$)	AMOUNT PAID
Project Cost:	- 200999 45405		
SOCC: VACANT	200999 48500	-	
SECC: VACANT	200999 48501		_
SOCC:	200999 48502		N/A
SECC:	200999 48503		_
Upgrade Charges:	200999 48504		_
Engineering:	200999 45206		
Гетр Connection:	200999 45407		
Electric Improvement:	200999 45404		
Relocation			
Subtotal			N/A
Less contribution- if applicable			N/A
Total Amount of Charges:			_

CITY OF ST CHARLES



Application for Generator Building PermitDepartment: Building & Code Enforcement Division
Phone: (630) 377-4406 Fax (630) 443-4638

Date: Permit No PLEASE PRINT ALL INFORMATION			
I,, do hereby apply for a permit for the following described work			
located at	Estimated Cost:		
Description of proposed work:			
Check List for Submittal of Application:			
	vation District? Yes/No If yes, your application and plans will need		
to be reviewed by the Historic Preservation C			
☐ Building Permit Application – Completely Fil☐ Electric Service Application – Completely Fil☐			
☐ If permit is for replacement of rooftop general			
	on of the Generator, with electric panel and gas lines indicated on the		
plat.			
Four (4) Copies of the specifications on the go			
Electric service application – if the generator			
CARD (IN OUR OFFICE ONLY).	I, CHECK TO THE CITY OF ST. CHARLES OR CREDIT		
Owner of the Property:	Applicant:		
• •			
Name:	Name:		
Address:	Address:		
City/State/Zip Code:	City/State/Zip Code:		
Email:	Email:		
Telephone NO	Telephone NO		
General Contractor:	Contractor:		
Name:	Name:		
Address:	Address:		
City/State/Zip Code:			
Email:	Email:		
Telephone NO.	Telephone NO.		
	, I will comply with all provisions of the building, plumbing, electric and I shall perform all work, or cause all work to be performed according to the		
	nally supervise the work and shall do, or cause to have done, said work		
	mation supplied as a part of this application. I am familiar with the		
	gning this application do willingly become responsible for all work men and workmen, and shall call for inspections as required at a minimum		
of 24-hours before they become due.	men and workinen, and shan can for inspections as required at a minimum		
PRINT NAME:	SIGNATURE:		
REPORT OF THE BUILDING O	FFICIAL		
Accepted: Rejected: Date			
Signed:			