



## KANKAKEE COUNTY PLANNING DEPARTMENT BUILDING & ZONING DIVISION

### HOUSE/ADDITION/GARAGE/POLE BUILDING/OTHER ACCESSORY BUILDINGS LARGER THAN 200 SQ. FT. PERMIT APPLICATION

#### INSTRUCTIONS

Section 1 and Section 7 to be completed by Owner or Authorized Agent. Please note that if your property is in a subdivision, the covenants and restrictions of that subdivision should be consulted to ensure your project is in compliance. Covenants and restrictions for subdivisions can be obtained from the Kankakee County Recorder of Deeds Office. The Planning Department does not enforce subdivision covenants and restrictions.

Section 4. The application must be signed by the owner or authorized agent.

#### REGULATIONS

1. You will need a plot plan showing any buildings on your property, as well as the proposed building. You will also need to show the septic field if one already exists. The plot plan should also have the dimensions to the property lines, from the proposed structure.
2. You will need to provide at least one set of drawings for your project.
3. Fill out the plan review sheet which will tell us how you are building the structure.
4. Fill out the contractor list for each applicable contractor in your project. All contractors must be registered and current with all certificates. Home owner may do all the work on their project.
5. If you are insulating any of your project you will need to fill out the Energy Code Checklist.
6. If you have any plumbing on your project, you will need your plumber to get us a Plumbing Letter of Intent. This is a letter on the Plumbers letterhead telling us that he is doing the work on your property. It will have your name, the property address and his license numbers on it. If you are doing your own plumbing, you will be asked to fill out a plumbing affidavit.
7. Any trusses on your project will need to have truss stamp paperwork.
8. Any engineered lumber or steel will need architectural or structural engineer stamped plans or paperwork.
9. When you turn in your Building Permit Application sheet, along with any of the list above that pertains to your project, you may also be given the following...
  - a. Septic Referral Form. This will be given out for any project that require a septic system, or needs a current system checked to make sure it is still functional. It will also be given out in subdivisions that have city sewer, to pay for tap on fees. If doing a new septic system or having an old one checked out, the paperwork will go to the Kankakee County Health Department. If paying tap on fees, you will be directed where to pay them, and you will bring the receipt back to us.
  - b. 911 Form. You will get this form if your property does not have an address. This will be returned to us, once you have it filled out.
  - c. Culvert Permit. If your property has a ditch and requires a culvert you will be given this form to take to your Township Road Commissioner.
  - d. If you are in a subdivision you will need an Erosion Control Permit, which we will fill out for you, telling you what will be required of you. The permit fee for this is \$100.00.
  - e. You may have School Impact Fees, depending on where your property is located. This is a form we will fill out for you. You will need to pay these at IKAN before the permit will be issued.

#### SUBMITTAL REQUIREMENTS

All the above will be needed to issue a permit for your project. A minimum of the Application and a description of your project with accompanying drawings, will allow us to get the process started for # 9a-e as it may pertain to your project.



**KANKAKEE COUNTY PLANNING DEPARTMENT BUILDING & ZONING DIVISION**  
**HOUSE/ADDITION/GARAGE/POLE BUILDING/OTHER ACCESSORY BUILDINGS**  
**LARGER THAN 200 SQ. FT. PERMIT APPLICATION**

Add-On: ☐ Date of Add-On: \_\_\_\_\_  
Date Received: \_\_\_\_\_ Erosion Fee: \_\_\_\_\_ Deposit: \_\_\_\_\_  
Building Permit Fee: \_\_\_\_\_ Admin. Fee: \_\_\_\_\_ Total Fee: \_\_\_\_\_  
Date Issued: \_\_\_\_\_ Paid: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Applicant to complete this section:

**SECTION 1: OWNER INFORMATION**

Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Telephone Number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Will the homeowner be performing the work themselves? Yes \_\_\_\_\_ No \_\_\_\_\_

**SECTION 2: PROPERTY INFORMATION**

PI No: \_\_\_\_\_ Township: \_\_\_\_\_  
Floodway/Floodplain: \_\_\_\_\_ Date: \_\_\_\_\_ Initials: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Block No.: \_\_\_\_\_ Lot No: \_\_\_\_\_  
Zoning District: \_\_\_\_\_ Check PI File: Date: \_\_\_\_\_ Initials: \_\_\_\_\_

**SECTION 3: PROJECT INFORMATION**

Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Use of Structure: \_\_\_\_\_

Signed Contract (Attach): \_\_\_\_\_ Total Value: \_\_\_\_\_  
Material: \_\_\_\_\_ Labor: \_\_\_\_\_ Other: \_\_\_\_\_

**SECTION 4: AUTHORIZATION**

As the owner or authorized agent of the above described property, I hereby authorize the addition of the above described improvements and work that will be performed by the contractors listed or by myself. The information provided is accurate to the best of my knowledge

\_\_\_\_\_  
(Signature of Owner or Authorized Agent)

## SECTION 5: DOCUMENTS

ITEM	DATE FORM GIVEN	DATE RECEIVED	DATE APPROVED
Referral Form/Septic Permit			
Aqua Referral			
911 Form			
Culvert Permit			
Plot Plan			
Erosion Control Permit			
1 Set of Plans			
Plan Review Sheet			
Copy of Recorded Deed/GIS			
Contractor's List			
Impact Fees			
Farm Affidavit			
Stormwater			
Energy Code Checklist			
Plumbing Letter of Intent			

Application Taken By: \_\_\_\_\_

## SECTION 6: PLAN/ APPLICATION REVIEW

Application Reviewed By: \_\_\_\_\_ Approved: ☐ Denied: ☐

If denied, state reason why: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SECTION 7: CONTRACTOR INFORMATION

Permit# \_\_\_\_\_

**Owners Name:** \_\_\_\_\_ **Type of Construction:** \_\_\_\_\_

If the contractor's list should change at any time during the project, a revised list shall be submitted to the Planning Department

General: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Carpentry: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Concrete: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

DampProof: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Drywall: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Electric: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Excavating: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

HVAC: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Insulation: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Masonry: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Siding: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Roofing: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____
State License #: <b>104-</b> _____	Expiration _____

Plumbing: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____
State License #: <b>058-</b> _____	Expiration: _____
State Registration #: <b>055-</b> _____	Expiration: _____

Other: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Other: _____	License # _____
Address: _____	Signed Aff. _____ Yes _____ No _____
Phone #: _____	Gen. Lib. _____ Yes _____ No _____
	Work Comp _____ Yes _____ No _____
	Bond _____ Yes _____ No _____

Date Received: \_\_\_\_\_ Date Approved \_\_\_\_\_ Approved By: \_\_\_\_\_



**KANKAKEE COUNTY PLANNING DEPARTMENT  
BUILDING & ZONING DIVISION PERMIT APPLICATION**

**Plain Review Owner/Contractor Information List**

**(Document must be completed in its entirety. If a section does not apply, mark NA, Not Applicable)**

Date: \_\_\_\_\_

Owners Name: \_\_\_\_\_

Address: \_\_\_\_\_

Directions to Property: \_\_\_\_\_

Township: \_\_\_\_\_ PI # \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot # \_\_\_\_\_

General Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

**Lot Information:**

Dimensions: Frontage \_\_\_\_\_ Left-Side \_\_\_\_\_ Right-Side \_\_\_\_\_ Rear \_\_\_\_\_

Set Backs: Front \_\_\_\_\_ Left-Side \_\_\_\_\_ Right-Side \_\_\_\_\_ Rear \_\_\_\_\_

Structure Square Footage:

1<sup>st</sup> Floor \_\_\_\_\_ 2<sup>nd</sup> Floor \_\_\_\_\_ Basement \_\_\_\_\_ Garage \_\_\_\_\_ Bonus Room \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_ Number of Bathrooms \_\_\_\_\_

Design Loads:	Dwelling unit	40psf
	Attic floor with storage	20psf
	Other floors	30psf
	Roof	20psf

**FOUNDATION:**

**Excavation:** Depth Below Grade \_\_\_\_\_  
Elevation of the Lot will Change: Yes \_\_\_\_\_ No \_\_\_\_\_

**Footings:** Dimensions \_\_\_\_\_" X \_\_\_\_\_"  
Horizontal Rebar: size \_\_\_\_\_ # of sticks \_\_\_\_\_  
Vertical Rebar: size \_\_\_\_\_ OC \_\_\_\_\_

**Wall:** Thickness \_\_\_\_\_ Height \_\_\_\_\_  
Horizontal Rebar: # \_\_\_\_\_ rows; # sticks per row \_\_\_\_\_  
Vertical Rebar: # \_\_\_\_\_ rebar; inches on center \_\_\_\_\_  
Brickledge \_\_\_\_\_

Waterproof \_\_\_\_\_ Damp proof \_\_\_\_\_ Footing drain \_\_\_\_\_

**Pier Footings:**

Dimensions \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
Rebar required: # \_\_\_\_\_ size \_\_\_\_\_  
Spacing \_\_\_\_\_  
Lolly Columns: Dimensions \_\_\_\_\_ Hollow/Filled \_\_\_\_\_

**BASEMENT:****Basement Floor:**

Thickness \_\_\_\_\_ Vapor Barrier \_\_\_\_\_ WWM \_\_\_\_\_  
Fiberglass \_\_\_\_\_ Sump pump pit \_\_\_\_\_ Floor drain \_\_\_\_\_  
Ejector pit \_\_\_\_\_  
Egress window: \_\_\_\_\_ X \_\_\_\_\_ (Min. 5.7 sq. ft.)  
**Vertical rebar must be within 12" of top of wall.**

**CRAWLSPACE:**

Conditioned \_\_\_\_\_ or Unconditioned \_\_\_\_\_ Space  
Access: dimensions \_\_\_\_\_ Location \_\_\_\_\_  
Wall Desc: \_\_\_\_\_ block  
\_\_\_\_\_ poured wall/ Rebar- #rows \_\_\_\_\_ #per \_\_\_\_\_  
Wall: Height \_\_\_\_\_ Width \_\_\_\_\_ Ventilation # of vents \_\_\_\_\_  
**Vapor Barrier Required** (must be within 3' of corner)

Concrete Floor \_\_\_\_\_ Sump Pit \_\_\_\_\_ Ejector Pit \_\_\_\_\_  
Floor Drain \_\_\_\_\_ WWM \_\_\_\_\_ Fiberglass \_\_\_\_\_

**BEAM DESCRIPTION:**

Steel- \_\_\_\_\_ size (beam seal required at time of application)  
LVL- \_\_\_\_\_ size (LVL seal required at time of application)  
Manufactured wood dimensions \_\_\_\_\_  
Hemlock Fir Douglas Fir SPF Other \_\_\_\_\_

**FLOOR JOISTS:**

DougFir HemFir SPF Other \_\_\_\_\_  
1<sup>st</sup> Floor size \_\_\_\_\_ spacing \_\_\_\_\_ longest span \_\_\_\_\_  
2<sup>nd</sup> Floor size \_\_\_\_\_ spacing \_\_\_\_\_ longest span \_\_\_\_\_  
Floor sheathing: thickness \_\_\_\_\_ plywood \_\_\_\_\_ OSB \_\_\_\_\_ Other \_\_\_\_\_

**WALLS – Exterior:**

The maximum length of a 2x4 is 12' on 16" centers. (This is when supporting a roof only. When supporting one floor and a roof or two floors and a roof check applicable codes for maximum lengths)

Stud Size \_\_\_\_\_ Spacing \_\_\_\_\_ Sill Plate Size \_\_\_\_\_  
Exterior Headers \_\_\_\_\_ Exterior Sheathing \_\_\_\_\_  
Interior Headers \_\_\_\_\_

**Insulation:**

The State of Illinois amended the Energy Efficient Building Act to include residential buildings in Illinois. This law requires the 2009 International Energy Conservation Code (IECC) be the energy code for all residential construction in Illinois. The code sections listed are from Chapter 4 in the 2009 IECC. Energy Code Checklist for Residential shall be completed and attached to this document.

**Exterior:**

Siding: vinyl \_\_\_\_\_ alum. \_\_\_\_\_ wood \_\_\_\_\_ brick\* \_\_\_\_\_  
Other \_\_\_\_\_

\*Weepholes are required – min. 33" separation; min 3/16" dia.  
Required above all lintels and base of foundation.

**CEILING JOISTS:**

DougFir \_\_\_\_\_ HemFir \_\_\_\_\_ SPF \_\_\_\_\_ Other \_\_\_\_\_  
Size \_\_\_\_\_ spacing \_\_\_\_\_ longest span \_\_\_\_\_  
Attic Access location \_\_\_\_\_ size of opening \_\_\_\_\_ (min. 22"x30")

**ROOF SYSTEM:**

Trussed Roof – Truss Schedule required at time of application

Rafters: DougFir \_\_\_\_\_ HemFir \_\_\_\_\_ SPF \_\_\_\_\_ TJI \_\_\_\_\_  
Size \_\_\_\_\_ Spacing \_\_\_\_\_ OC \_\_\_\_\_ Longest Span \_\_\_\_\_  
Sheeting Thickness \_\_\_\_\_ OSB \_\_\_\_\_ Plywood \_\_\_\_\_  
Type of Ventilation \_\_\_\_\_ Underlayment \_\_\_\_\_  
Type of Roof Covering \_\_\_\_\_

**GARAGE:**

Dimensions \_\_\_\_\_ X \_\_\_\_\_  
Floor Thickness: \_\_\_\_\_ WWM \_\_\_\_\_ Poly \_\_\_\_\_ Fiber \_\_\_\_\_  
Beam: Steel (provide beam seal at time of application)  
LVL – dimensions \_\_\_\_\_ (provide LVL Seal at time of application)  
5/8" Gypsum on Garage Side between House and Garage \_\_\_\_\_  
20 Minute Fire Rated Door between House and Garage \_\_\_\_\_

**Hazardous glazing locations** (all glass shall be tempered in hazardous locations)

**If any questions, please contact an inspector.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Stairs:**

Rise \_\_\_\_\_ Depth of Tread \_\_\_\_\_ Width \_\_\_\_\_ Winders \_\_\_\_\_  
Handrail Ht. \_\_\_\_\_" (handrails must return to walls)  
Baluster spacing \_\_\_\_\_ (less than 4" openings between spindles).



**Fireplace:**

Prefab unit \_\_\_\_\_ Manufacturer \_\_\_\_\_  
Brick \_\_\_\_\_ Hearth Extension: side \_\_\_\_\_ front \_\_\_\_\_

**ELECTRICAL:**

Service Size \_\_\_\_\_ amperage (overhead \_\_\_\_\_) (underground \_\_\_\_\_)

12 gauge wire, Min size in Kankakee County

All penetrations of top and bottom plates must be fireblocked. Vertical runs greater than 10 feet

**Arc Fault Circuit Interrupters.** Arc Fault Circuit Interrupters (Breakers) are required for all dwelling circuits including smoke detector circuit.

**FRAMING:**

- Auto return on common doors between home and garage
- Windows <24" above floor >72" must have fall protection
- Address on house 4" high ½" wide

**Garbage Dumpsters & Portable Restrooms are required on all construction sites in Kankakee County.**

**All Construction Shall Comply with Codes Currently Adopted by Kankakee County. All applicable information must be entered for project to be reviewed.**

I have received the significant code changes and I agree to build the project to all currently adopted codes and amendments:

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

Building Dept. Comments \_\_\_\_\_



# KANKAKEE COUNTY PLANNING DEPARTMENT BUILDING & ZONING DIVISION PERMIT APPLICATION

## Energy Code Checklist for Residential Construction

(This form is required for New Residential Buildings, Additions, Alterations, Repairs and other Permits as Applicable)

Effective Jan. 1, 2024, the State of Illinois requires that all construction follow the Energy Efficient Building Act. This law requires the 2021 International Energy Conservation Code (IECC) be the energy code for all construction in Illinois. Code sections listed from the 2021 IECC-Residential Provisions.

Project Address:		Permit #
Owner Name: General Contractor:		Checked By
Phone #:	PI Number:	Date
Project Type: (Check One) <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Renovation		Method

### Required Documentation with Permit Submittal: (Check One)

1. **Energy Compliance Documentation** – Choose ONE method. All methods must meet mandatory requirements.
- ☐ **Prescriptive Method** – Must comply with R402.1.1, R402.2, R402.3, R403.2.1, & R403.4.2 & mandatory requirements (below) - USE THIS FORM (# 1,2,3,4,5,6)
- ☐ **Trade Off Method** (R402.1 through R402.3, R403.3.1 & R403.5.2 & mandatory requirements) - USE THIS FORM (# 1,2,3,4,6) and attach documentation to show compliance (i.e. REScheck). REScheck must include compliance form, inspection checklist and certificate. [www.energycodes.gov/REScheck](http://www.energycodes.gov/REScheck) (it's free & easy!).
- ☐ **Performance Method** (R405 & mandatory requirements) - USE THIS FORM (#1,2,3,4) and attach documentation to show compliance. Documentation must include standard reference design and proposed design.
2. **Mandatory Requirements** – All projects must meet the mandatory requirements of the IECC (R401.3, R402.4, R402.5, R403.1, R403.2.4, R403.3.7, R403.3, R403.4.1, R403.6 thru R403.9, & R404).

Mandatory Requirements	Compliance
a) <b>Certificate (R401.3)</b> Permanent certificate posted on/near elec. panel with energy values	<input type="checkbox"/> Will Comply
b) <b>Building Thermal Envelope (R402.4.1.1)</b> Seal building envelope from air infiltration	<input type="checkbox"/> Will Comply
c) <b>Air Sealing and Insulation Testing/Insp. (R402.4.1.2)</b> Verify sealing and insulation-choose one method. <b>Blower Door Test Required for NEW BUILDINGS ONLY</b>	<input type="checkbox"/> Blower Door (provide report) <input type="checkbox"/> Visual Inspection
d) <b>Fireplaces (R402.4.2)</b> Wood-burning have tight flue damper and outdoor combustion air	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
e) <b>Fenestration Air Leakage (R402.4.3)</b> Windows, sliding glass doors, skylights	<input type="checkbox"/> ≤ 0.3 cfm/sf (Check Label) <input type="checkbox"/> N/A
f) <b>Fenestration Air Leakage (R402.4.3)</b> Exterior swinging doors	<input type="checkbox"/> ≤ 0.5 cfm/sf (Check Label) <input type="checkbox"/> N/A
g) <b>Recessed Lighting (R402.4.5)</b> IC-rated and air tight when <u>in</u> thermal envelope	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
h) <b>Heating/Cooling System Controls (R403.1.1)</b> Programmable thermostat for furnace	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
i) <b>Duct Sealing (R403.2.4)</b> All ducts sealed with approved material(s)	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
j) <b>Building Cavities (R403.3.7)</b> Building framing cavities shall not be used as ducts both S&R	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
k) <b>Mechanical System Piping Insulation (R403.4)</b> R-3 minimum for > 105°F or <55°F	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
l) <b>Circulating Hot Water System (R403.4)</b> Piping insulated R-3 min. and on/off switch	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
m) <b>Mechanical Ventilation (R403.6)</b> See State of Illinois Amendments for requirements	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
n) <b>Equipment Sizing (R403.7)</b> Heating/Cooling equipment sized per ACCA Manuals S & J	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
o) <b>Hot Water Pipe Insulation (R403.5.1)</b> R-3 Insulation on: piping > 3/4", kitchen hot water piping, buried/under slab piping, piping over length: 3/8">30', 1/2">20', 3/4">10'	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
p) <b>Lighting Equipment (R404.1)</b> ALL permanent light fixtures required to be high efficacy, except appliance fixtures	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A

3. **Building Wall Section** – Required for all new buildings and additions. Additional documents may be required by the Building Official. Minimum (1) section required. *For interior alterations include documents to illustrate code compliance as necessary.* Use County of Kankakee BUILDING WALL SECTION sheet to help with this requirement.
4. **Floor Plan** – Required for all new buildings and additions. Floor plan must indicate thermal envelope, conditioned/unconditioned spaces and heating system location.
5. **Prescriptive Requirements – COMPLETE THIS TABLE**, if Prescriptive Method is chosen. Letters correspond to #3 above in regards to the County of Kankakee BUILDING WALL SECTION sheet.

Building Components	Prescriptive Standard	Proposed/ Actual Value	Remarks
<b>Insulation (R402.2) Prescriptive Standard is Minimum R-Value</b>			
<b>A.</b> Ceilings with Attic Spaces (R402.2.1)	<b>R-49 / R-38</b>		<i>R-49 for standard truss, can be reduced to R-38 with Raised Heel/Energy Truss</i>
<b>B.</b> Ceilings without Attic Spaces (R402.2.2)	<b>R-30</b>		<i>Limited to 500 s.f. OR 20% of the total insulated ceiling area, whichever is less</i>
<b>C.</b> Wood Frame Wall (Table R402.1.3)	<b>R-30 or R-20 &amp; 5ci or R-13 &amp; 10ci</b>		<b>First value is cavity. (ci) is continuous insulation</b>
<b>D.</b> Floors Over Unconditioned Space (R402.2.7)	<b>R-30</b>		<i>Floor insulation shall maintain permanent contact with subfloor decking</i>
<b>E.</b> Basement Walls (R402.2.8)	<b>R-15 or R-19</b>		<b>R-15 continuous insulation on the interior or exterior or R-19 for interior wall cavity</b>
<b>F.</b> Slab-on-Grade Floors (R402.2.9)	<b>R-10</b>		<i>Insulation depth shall be the depth of the footing + 4' horizontally</i>
<b>G.</b> Crawl Space Walls (R402.2.10)	<b>R-15 or R-19</b>		<b>R-15 continuous insulation on the interior or exterior or R-19 for interior wall cavity</b>
<b>Fenestrations (R402.3) Prescriptive Standard is Maximum U-Factor</b>			
<b>H.</b> Windows, Sliding Glass Doors, and Swinging Doors with > 50% glazing	<b>U-0.30</b>		<i>An area weighted average may be used to satisfy the U-factor requirements but must include all windows, skylights, glass doors and opaque doors. Provide documentation if this is used.</i>
<b>J.</b> Skylights	<b>U-0.55</b>		

(The above table is based on wood frame construction and common building practices, if not addressed in the table above, please attach separate documentation to illustrate code compliance. See code book for sunrooms. Values are based on Climate Zone 5A in the 2021 IECC).

#### 6. Other Prescriptive Requirements:

Other Prescriptive Requirements if applicable	Compliance
<b>Duct Insulation (R403.3.1)</b> Supply ducts in attic $\geq 3"$ R-8, all other ducts outside thermal envelope $\geq$ R-6	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
<b>Duct Tightness Test (R403.3.6)</b> Required on all new homes. Additions determined by Planning Dept.	<input type="checkbox"/> Test 1 <input type="checkbox"/> Test 2 <input type="checkbox"/> N/A
<b>Eave Baffle (R402.2.3)</b> Vented attics with blown-in or fiberglass insulation shall have a baffle	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A
<b>Attic Hatches (R402.2.4)</b> Access doors to attic must be weatherstripped and insulated	<input type="checkbox"/> Will Comply <input type="checkbox"/> N/A

#### Notes:

- i. For further clarification of the above items, please refer to the 2021 International Energy Conservation Code (IECC).
  - ii. Visit the State of Illinois Energy Code page for amendments and other info at [www.ildceo.net/energycode](http://www.ildceo.net/energycode)
- For free, up-to-date energy references, energy training and energy code [info, visit www.energycodes.gov](http://www.energycodes.gov)

Applicant Signature: \_\_\_\_\_

Applicant Name (Please Print): \_\_\_\_\_ Date: \_\_\_\_\_

