

**Village of Vernon Hills
Community Development Department
290 Evergreen Drive, Vernon Hills, IL 60061
Phone 847-367-3704 - Fax 847-367-2541 - <http://www.vernonhills.org>**

**LOW VOLTAGE WIRING PERMIT PROCESS
(VOICE, DATA, SOUND, TELEPHONE & TEMPERATURE CONTROL)**

TO APPLY FOR A PERMIT:

If all of the information listed below is provided at the time of submittal, a permit will be issued immediately over the counter.

1. Submit a completed permit application.
2. Permit fee may be paid in the form of a check made payable to the Village of Vernon Hills, or in cash. Fees will be determined based upon the cost of construction.

THE FOLLOWING ARE INSTALLATION REQUIREMENTS:

1. Open wiring is acceptable.
2. All equipment must be listed by a nationally-recognized testing lab.
3. All wiring not accessible due to construction shall be installed in conduit.
4. All wires penetrated through walls or ceilings shall be installed in conduit.
5. All wiring subject to physical damage shall be installed in conduit.
6. If wiring is installed in a plenum area, all wiring and support of wiring shall be plenum-rated.
7. All existing wiring shall be removed, if abandoned. This includes all low voltage cables.

INSPECTION REQUIREMENTS:

The permit holder is responsible for scheduling an inspection. To request an inspection, call the Building Division at 847-367-3704, 24 hours in advance and have your permit number available.

1. Call for final inspection.

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**PERMIT APPLICATION
LOW VOLTAGE WIRING**

(VOICE, DATA, SOUND, TELEPHONE, TEMPERATURE CONTROL)

PLEASE PRINT

Project or Homeowner Name: _____

Address: _____

Phone: _____ **E-Mail** _____

Applicant's Name: _____

Phone: _____ **E-Mail** _____

Please check all that apply:

Commercial Property: VOICE _____ DATA _____ SOUND _____

TELEPHONE _____ TEMPERATURE CONTROL _____

Market value cost of construction (include labor & materials): _____

Work being performed by:

Contractor: Name: _____

Address: _____

Phone #: _____

FOR OFFICIAL USE:

PERMIT: \$ _____

BOND: \$ _____

TOTAL: \$ _____