Village of Glen Ellyn
1&2 - Family Dwelling Building & Zoning Worksheet

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1. **Property Address:** _____ Zoning District: _____

   Describe the Project: _____

2. **Lot Coverage Ratio (LCR):** District Maximum **R0, R1, R2, R3** = 20% for 2-story or 35% for 1-story structures.
   All roofed over areas of the principal and accessory structures on the zoning lot must be included unless the area of a detached garage or open front porch is excluded by exception in Zoning Code Chapter 4 District Regulations. Lot coverage area calculations:

   Existing _____ sq ft + New _____ sq ft – Garage _____ sq ft – Porch _____ sq ft = Total _____ sq ft

   Total lot coverage area _____ sq ft ÷ lot area _____ sq ft x 100 = _____ % LCR

3. **Front Yard Setback:** District Minimums: **R0** = 50 ft, **R1** = 40 ft, **R2** = 30 ft

   Min. required front yard setback: no closer than the closest enclosed portion of the principal structure on either adjacent lot

   1. Address (Left Side) _____ Existing Setback: _____ ft

   2. Address (Right Side) _____ Existing Setback: _____ ft

   Required Front Yard Setback (lesser of number 1 or 2 above – 50 ft maximum) _____ ft

   Front Yard Setback (existing structure): _____ ft Proposed Front Yard Setback: _____ ft

   Permitted Open Front Porch Setback (Required Front Yard setback from above x 0.75) = _____ ft

   Proposed Open Front Porch Setback: _____ ft

4. **Side Yard Setback:** District Minimums: **R0**=15% of lot width, **R1**=10% of lot width, **R2**=Greater of 6.5 ft or 10% of lot width

   Lot width _____ ft x 0.1 for **R1** and **R2**; or x .15 for **R0** = _____ ft

   Interior Side Yard Setback (existing structure): Left: _____ ft Right: _____ ft

   Proposed Interior Side Yard Setback: Left: _____ft Right: _____ ft

5. **Corner Side Yard Setback:** District Minimums: **R0** = 40 ft, **R1** = 40 ft, **R2** = 30 ft

   Corner Side Yard Setback (existing structure): _____ ft Proposed Corner Side Yard Setback: _____ ft

   Corner Side Yard Setback for lots less than 80 feet wide in the R2 District complete this section below:

   Lot width _____ x .30 = _____ ft Minimum allowable corner side yard setback

   Permitted Open Porch Setback (Required Corner Side Yard Setback from above) x 0.75 _____ ft

   Proposed Open Porch Setback: _____ ft

6. **Rear Yard Setback:** Minimums: **R0** = 60 ft, **R1** = 50 ft, **R2** = 40 ft

   Rear Yard setback (existing structure): _____ ft

   Proposed Rear Yard setback: _____ ft

7. **Impervious Surface Setback:** Minimum based on lot width = 2% (<66'), 3% (66'-<90'), 4% (90'-100'), 5% (>100')

   Lot Width _____ x _____ Percentage Required = _____ Required Setback (ft)

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8. **Building Height:** The maximum eave and ridge heights and permitted height bonuses are specified in Zoning Code Section 10-4-8(F)1. Roof height is determined at the highest eave and at the highest ridge from average existing grade at four (4) corners where an imaginary line parallel to the front and rear yard setback lines and touching the proposed structure intersects the required side yard setback lines. Grade elevations at all four points shall be shown on Plat of Survey/Site Development Plan.

A. Front Left Point Grade Elevation: _____ B. Front Right Point Grade Elevation: _____

C. Rear Left Point Grade Elevation: _____ D. Rear Right Point Grade Elevation: _____

Grade Elevation Total (A + B + C + D) = _____ ÷ 4 = _____ Average existing grade

Max Ridge Height _____ ft + Porch Bonus or Setback Bonus _____ ft = Permitted Ridge Height _____ ft

Max Eave Height _____ ft + Setback Bonus _____ ft = Permitted Eave Height _____ ft

Proposed Heights Measured From Average Existing Grade:

Top of Foundation _____ ft Highest Eave _____ ft Highest Ridge _____ ft

9. Building Classification:

Any change to an existing building is assigned a classification based on a new use or the proposed work. Village Code 4-1-10 (D) requires certain building improvements be completed for each classification.

A. Alteration: Any change to the exterior structure or part thereof (excluding exterior finishes) of a building.
Walls: the square footage of all outside wall surfaces from a point 8" above the adjacent grade to the soffit or eave.
Roof: the square footage of the horizontal plane(s) formed by the outside top edge of the perimeter walls.

Existing Roof Area: _____ sq ft + Existing Wall Area: _____ sq ft = Total Exterior Surface _____ sq ft

Area of Roof Altered: _____ sq ft + Area of Walls Altered: _____ sq ft = Total Area Altered _____sq ft

Total Area Altered: _____ sq ft ÷ Total Exterior Surface: _____ sq ft x 100 = _____ %

Alteration Classifications: (circle one) Class I = Under 50%, Class II = 50% - 75%, Class III = above 75%

B. Addition: Any change to a structure or part thereof that increases the finished floor area of the building

Floor Area of Addition: _____ sq ft ÷ Floor Area of Existing Building: _____ sq ft x 100 = _____ %

Addition Classifications: (circle one) Class I = Under 75%, Class II = 75% - 150%, Class III = above 150%

C. Remodeling: Any change to the interior or part thereof of a building. The hard cost is the total value of interior improvements (except interior finishes and fixtures). Remodeling Classifications: (circle one)

Class I = under $15,000 hard cost Class II = $15,000-$200,000 hard cost Class III = over $200,000 hard cost

D. Change of Use: Any change in the purpose or activity within a building or part thereof. See Village Code 4-1-10 (E) Hazard Index Table for index number. Change of Use Classifications: (circle one)

Class I = 0 to 1 increase in index number Class II = 2 or more increase in index number

I do certify that to the best of my knowledge and belief, the Zoning worksheet has been completed substantially in accordance with the building plans. I further agree that if this certification is in error, the permit issued and erection commenced on the strength of said certification, that I will assume full responsibility for any and all changes in the exterior shape and/or design of said residence required to make it comply with the Village of Glen Ellyn Zoning Ordinances.

_____ _____ _____

Authorized Agent (Signature) **Print Name** **Date**