

**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>**

**SATELLITE DISH**

This hand out is for **REFERENCE ONLY**. For more details see specific code sections.

Subdivision covenants or homeowner's associations may either prohibit or have more restrictive requirements than Village ordinances. Please verify if applicable. Several homeowner's associations have asked the Village to obtain a copy of Association approval letters at the time a permit application is submitted. Please be prepared to include a copy with your application.

**APPLICATION REQUIREMENTS:**

1. All satellite antennas will require an electrical permit and will require an electrical inspection. If the satellite antenna is more than twenty four (24) inches in diameter, it will require a building permit. In all cases, the satellite antenna shall comply with any applicable village ordinances and fire codes.
2. A permit for a satellite antenna for a townhome or condominium will not be granted without permission from the respective Homeowner's Association.
3. All applications shall indicate the owner or owners of the subject property, the occupant of the subject property, and the name of the person or company who shall be permitted to construct or erect the satellite antenna. If the applicant is the Homeowner's Association, the names and address of the Officers of the Association shall be included. If the application is a lessee, written permission from the property owner shall be submitted.

**CONSTRUCTION REQUIREMENTS:**

1. All satellite antennas are to be located so that they cannot come in contact with any 120 volt or above wires.
2. Only Listed type RG6 wire shall be used as lead in wires. A grounding block must be installed in this lead-in wire before it enters the building. It must be grounded to the building grounding system. A minimum #10 copper conductor shall be used.
3. The satellite antenna mounting support shall be properly grounded. A minimum #10 copper conductor shall be used. This ground wire must be attached to the building grounding system. A ground rod may be installed only if the ground rod is then connected to the building grounding system with a ground wire not smaller than a #6 copper conductor.
4. The ground wire shall be protected from mechanical damage.

5. The ground wire shall be installed in as straight of a line as possible to the building grounding system.
6. The building grounding systems referred to above are the following:
  - a. The ground rod located at the electrical meter
  - b. The interior metal water piping
  - c. The metal service entrance conduit (only on homes with an overhead service)
  - d. Building steel if available

**CONSTRUCTION DOCUMENTS:**

1. A completed permit application
2. A \$75 plan review fee (commercial projects only)
3. Two (2) complete sets of drawings, showing locations of devices (for commercial only)
4. Copy of Homeowner's Association approval, if required

**NOTE:** If to be installed in Hawthorn Center, Mall Management approval is required at time of submittal of permit application.

**INSPECTION REQUIREMENTS:**

1. An inspection will be made after the installation is complete.
2. The permit holder is responsible for scheduling an inspection. To request an inspection, contact the Building Division at 847 367-3704 between the hours of 8:30 AM and 3:30 PM, Monday through Friday, at least one working day in advance.

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**PERMIT APPLICATION  
SATELLITE DISH**

**PLEASE PRINT**

**Project Name or Homeowner:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_  
**(If different from above)**

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Supply the following:**

- Homeowners Association Approval Letter (if applicable)
- Two (2) complete sets of drawings (Commercial only)
- Plan Review Fee (Commercial Only)
- Association Approval Letter (Westfield Hawthorn Center Only)

**Answer the following:**

**Estimated Satellite Dish Value \$** \_\_\_\_\_

**Height** \_\_\_\_\_

**Diameter** \_\_\_\_\_

**Location** \_\_\_\_\_

**Work being performed by:**

- Homeowner
- Contractor

**Name:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_