



# Application for Building/Electrical/Zoning Approval

**PROJECT #** (office use)

**PROJECT ADDRESS:** \_\_\_\_\_

**BUSINESS/TENANT NAME (if applicable):** \_\_\_\_\_

- |                                           |                                              |                                       |                                              |                                |                                           |
|-------------------------------------------|----------------------------------------------|---------------------------------------|----------------------------------------------|--------------------------------|-------------------------------------------|
| New Construction <input type="checkbox"/> | Interior Alteration <input type="checkbox"/> | Fire Alarm <input type="checkbox"/>   | Reroof / Siding <input type="checkbox"/>     | Deck <input type="checkbox"/>  | Driveway <input type="checkbox"/>         |
| Addition <input type="checkbox"/>         | Exterior Alteration <input type="checkbox"/> | Suppression <input type="checkbox"/>  | Accessory Structure <input type="checkbox"/> | Fence <input type="checkbox"/> | Shed <input type="checkbox"/>             |
| Electrical <input type="checkbox"/>       | HVAC <input type="checkbox"/>                | Kitchen Hood <input type="checkbox"/> | Tent <input type="checkbox"/>                | Pool <input type="checkbox"/>  | Other (describe) <input type="checkbox"/> |
- Electrical Service Size \_\_\_\_\_ (Line Drawing Required over 400 AMP)

**DESCRIBE PROPOSED WORK:** \_\_\_\_\_

**DESCRIBE TYPE OF BUSINESS (if applicable):** \_\_\_\_\_

NAME	ADDRESS (INCLUDE CITY, STATE, & ZIP)	PHONE
Applicant / Contractor		
Owner / Lessee		
Applicant Name (Print)	(Sign)	
Applicant Email		

**ESTIMATED COST & SQUARE FOOTAGE**

Building Structure _____	Suppression/Fire Alarm _____
HVAC _____	<b>TOTAL PROJECT COST</b> _____
Miscellaneous _____	<b>SQUARE FOOTAGE</b> _____

**BELOW IS FOR OFFICE USE ONLY**

Issue Date _____	Approval Fee _____
Use Group _____	Plan Review Fee _____
Const. Type _____	Fire Dept. Review Fee _____
Approval By _____	Sub Total _____
Zoning District _____	1% (ORC) / 3% (OBC) _____
	<b>TOTAL FEES DUE</b> _____

**\*\* SEE NEXT PAGE FOR COMMERCIAL CONSTRUCTION DOCUMENTATION CERTIFICATION \*\***



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### CONSTRUCTION DOCUMENTATION

Where the Ohio Building Code (OBC), as amended, applicable under Code Sections 104.2.1.1 and Code Section 105.1 OBC – Approvals Required – any owner or authorized agent who intends to construction, enlarge, alter, repair, move, or change the occupancy of a building or structure, or portion thereof, or to erect, install, enlarge, alter, repair, remove, convert or replace any electrical, gas, mechanical or plumbing system, the installation of which is regulated by this code, or to cause any such work to be done, shall first make application to the building official and obtain the required approval.

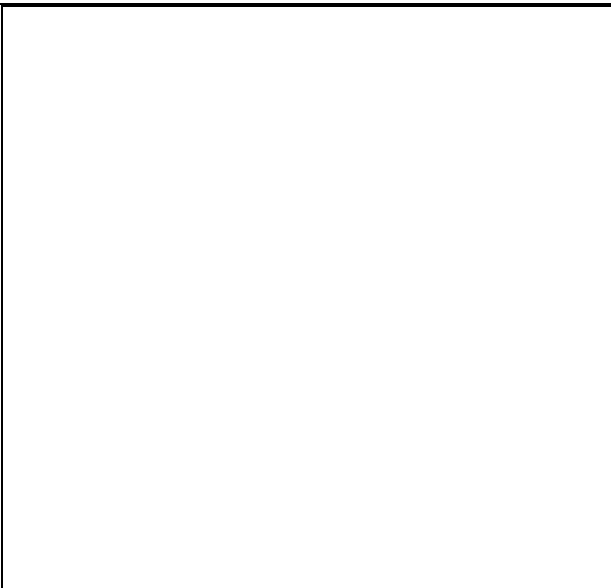
The plans and specifications for the above reference project are submitted herewith for examination and approval. The signature and stamp below certifies that I have prepared the plans and specifications to conform with the requirements of the Ohio Building Code (OBC) and Chapters 3781 and 3791 of the Ohio Revised Code.

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

Ohio Registration No. \_\_\_\_\_

Company: \_\_\_\_\_

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



Stamp/Seal