



Application for Residential Building Permit/Approval

Building Department Hours

Permit No. _____ **Date Issued** _____
 8am to 3pm Monday through Friday
 440-235-4225

Section 1- General Information

Date _____

PLEASE PRINT OR TYPE

Estimated Cost of Project _____

Address of Construction _____

Owner's Name _____ Phone _____

Owner's Address _____

Contractor _____ Business Phone _____

Contractor's Address _____

Street City State Zip

Section 2- Description of Property and Construction

- | | | | |
|---|--|---|--|
| Structure Type
<input type="checkbox"/> Single Family
<input type="checkbox"/> Two Family
<input type="checkbox"/> Three Family | Work Location
<input type="checkbox"/> Exterior
<input type="checkbox"/> Basement
<input type="checkbox"/> 1 st Floor
<input type="checkbox"/> 2 nd Floor
<input type="checkbox"/> 3 rd Floor | Type of Work
<input type="checkbox"/> New Structure
<input type="checkbox"/> Alteration (specify details)
<input type="checkbox"/> Repair (specify details)
<input type="checkbox"/> Rehabilitation (scope of work letter req.)
<input type="checkbox"/> Fire Repairs (specify details) | <input type="checkbox"/> Addition (plans required)
specify location
<input type="checkbox"/> Demolition (specify details) |
|---|--|---|--|

Window Replacement (Printed photos required)

Same style yes no

Same size yes no

Same color yes no

Steps (Printed photos required)

Location:

Front Rear Other:

Existing Type:

Wood Masonry

Proposed Type

Wood Masonry Other:

Interior

Remodel bathroom

Remodel kitchen

Remodel

Move/remove walls (plans required)

Drywall only (sq. ft.)

Support Post (specify location)

Deck (Site plans required & zoning approval)

Shed (Site Plans required & zoning approval)

Drawings, brochures or photos

Garage

Demo

Floor only (specify details)

New (plans required)

Siding (garage only)

Repairs (specify details)

Roofing

Other

Specify details

Porch

New (plans required)

Floor repairs (specify details)

Repairs (specify details)

Railings (specify details)

Porch Enclosure

Foundation (location)

Repair

New (plans required)

Retaining Wall

New

Existing

Repair (specify details)

Height

New roof material

Reroof material

Chimney

Repair

Rebuild

Swimming pool

Above ground

In ground

Food Truck

See section 140.07 of zoning regulations for requirements.

Road side stands

See section 210.08j of zoning regulations for requirements.



Repair work shall be specific to the repairs-include a scope of work letter and plans detailing the project.

Contractor is required to schedule a rough-in inspection before any concealment. By signing the application, the applicant certifies that the installation will comply with the regulations of the Olmsted Township Building Code and State Codes.

TO THE BUILDING COMMISSIONER: This application is submitted for a permit to erect, add to, alter or repair a structure as described in this application and any drawings which accompany it. The acceptance of the permit shall be considered an agreement on the part of the applicant or his agents to comply with the Building and Zoning codes of the Township of Olmsted Township, or other orders, requirements or specifications slated in the permit. In signing this application, the contractor or owner's agent certifies that the work is authorized by the owner or record.

Applicant's Signature _____ Print Name _____ Date _____

Applicant is: Owner Contractor Owner's Agent

DO NOT WRITE BELOW THIS LINE

Section 3-Additional Requirements (to be filled out by staff)

Reference building permit number _____

Section 4-Approval and Fees

Permit Fee: _____
Electrical Fee: _____
Mechanical Fee: _____
Trade Fee: _____
Site Fee: _____
Other Fee: _____
Engineer Fee: _____
Plan Review Fee: _____
Ohio BBS 1% OR 3% Fee: _____ (circle to indicate)
Total Fee Due: _____

Building Official _____ Date _____

Amount _____ Cash/Check# _____