

Village of Cuyahoga Hts Ohio

PERMIT # _____

APPLICATION FOR BUILDING PERMIT



TO THE COMMISSIONER OF BUILDINGS:

I, _____ (OWNER)

HEREBY MAKE APPLICATION FOR A PERMIT TO
ERECT OR BUILD, ALTER OR REPAIR A STRUCTURE
AS DESCRIBED IN THIS APPLICATION AND THE
ACCOMPANYING DRAWINGS, WHICH ARE A PART OF
THIS APPLICATION.

DATE: _____

LOCATION AND DESCRIPTION OF LOT

NO. AND. STREET

PERMANENT PARCEL NO.

NEAREST EXISTING BUILDING

ZONE

BEING _____ FEET FRONT AND _____ FEET DEEP ON THE _____ SIDE

BEING _____ FEET REAR AND _____ FEET DEEP ON THE _____ SIDE

DESCRIPTION OF BUILDING

1 PURPOSE OF CONSTRUCTION, OR INTENDED USE:

- | | | | |
|---------------------|--------------------------|-----------------------------|--------------------------|
| SINGLE DWELLING | <input type="checkbox"/> | COMMERCIAL AND INDUSTRIAL | <input type="checkbox"/> |
| TWO FAMILY DWELLING | <input type="checkbox"/> | WHOLESALE AND RETAIL STORES | <input type="checkbox"/> |
| GARAGE ATTACHED | <input type="checkbox"/> | ADDITION OR ALTERATION | <input type="checkbox"/> |
| GARAGE DETACHED | <input type="checkbox"/> | APARTMENT | <input type="checkbox"/> |
| OTHER | <input type="checkbox"/> | | |

2 SEWAGE SYSTEM

- | | | | |
|----------------|--------------------------|-------------|--------------------------|
| SEPTIC TANK | <input type="checkbox"/> | | |
| SANITARY SEWER | <input type="checkbox"/> | STORM SEWER | <input type="checkbox"/> |

3 CLOSEST SOURCE OF DRAINING SANITARY SYSTEM

4 DO YOU HAVE THE FOLLOWING IMPROVEMENTS? WATER ___ GAS ___ ELECTRICITY ___ SIDEWALK ___

NOTE: THIS APPLICATION TO BE TYPEWRITTEN OR FILLED OUT IN INK

PLEASE FILL IN YELLOW HIGHLIGHTED AREAS

4	NAME AND DESCRIPTION OF BUILDING

5	NATURE OF CONSTRUCTION

6	LOCATION OF PROJECT

7	TYPE OF CONSTRUCTION																															
	<table style="width:100%; border: none;"> <tr> <td style="width: 40%;">a. FIREPROOF</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%;">I-A</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%;">I-B</td> <td style="width: 10%;"></td> </tr> <tr> <td>b. NONCOMBUSTIBLE</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>II-A</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>II-B</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>II-C</td> </tr> <tr> <td>c. HEAVY TIMBER</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>III</td> <td colspan="3"></td> </tr> <tr> <td>d. ORDINARY</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>IV-A</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>IV-B</td> <td></td> </tr> <tr> <td>e. WOOD FRAME</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>V-A</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>V-B</td> <td></td> </tr> </table>	a. FIREPROOF	<input type="checkbox"/>	I-A	<input type="checkbox"/>	I-B		b. NONCOMBUSTIBLE	<input type="checkbox"/>	II-A	<input type="checkbox"/>	II-B	<input type="checkbox"/>	II-C	c. HEAVY TIMBER	<input type="checkbox"/>	III				d. ORDINARY	<input type="checkbox"/>	IV-A	<input type="checkbox"/>	IV-B		e. WOOD FRAME	<input type="checkbox"/>	V-A	<input type="checkbox"/>	V-B	
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8	ENTER OUTSIDE DEMENSIONS FOR EACH FLOOR <table style="width:100%; border: none;"> <tr> <td style="width: 150px;">a. BASEMENT</td> <td></td> </tr> <tr> <td>b. FIRST FLOOR</td> <td></td> </tr> <tr> <td>(CIRCLE NUMBER) c.</td> <td> <table style="display: inline-table; border: none;"> <tr> <td style="width: 20px;">2</td><td style="width: 20px;">3</td><td style="width: 20px;">4</td><td style="width: 20px;">5</td><td style="width: 20px;">6</td><td style="width: 20px;">7</td><td style="width: 20px;">8</td><td style="width: 20px;">9</td><td style="width: 20px;">10</td> </tr> </table> </td> </tr> <tr> <td colspan="2" style="text-align: center;">d. TOTAL SQUARE FEET</td> </tr> <tr> <td colspan="2" style="text-align: center;">d=(a+b+c)</td> </tr> </table>	a. BASEMENT		b. FIRST FLOOR		(CIRCLE NUMBER) c.	<table style="display: inline-table; border: none;"> <tr> <td style="width: 20px;">2</td><td style="width: 20px;">3</td><td style="width: 20px;">4</td><td style="width: 20px;">5</td><td style="width: 20px;">6</td><td style="width: 20px;">7</td><td style="width: 20px;">8</td><td style="width: 20px;">9</td><td style="width: 20px;">10</td> </tr> </table>	2	3	4	5	6	7	8	9	10	d. TOTAL SQUARE FEET		d=(a+b+c)		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">SQUARE FEET -- FLOOR AREA</th> </tr> <tr> <td>a.</td> </tr> <tr> <td>b.</td> </tr> <tr> <td>c.</td> </tr> <tr> <td>d.</td> </tr> </table>	SQUARE FEET -- FLOOR AREA	a.	b.	c.	d.
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9	ADDITIONAL BUILDING INFORMATION
a. TYPE OF OCCUPANCY	
b. ESTIMATED CONSTRUCTION COST \$	

OWNER	ARCHITECT / ENGINEER
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ADDRESS	ADDRESS
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TEL NO	TEL NO
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REGISTERED CONTRACTOR	REGISTERED SURVEYOR
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ADDRESS	ADDRESS
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TEL NO	TEL NO
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I, _____, THE OWNER OR BUILDER OF THE PREMISES DESCRIBED IN THE FOREGOING APPLICATION DEPOSES AND SAYS THAT THE ANSWERS HEREINBEFORE SET ARE TRUE. THE ACCEPTANCE OF THE PERMIT HEREIN APPLIED FOR SHALL CONSTITUTE AN AGREEMENT ON THEIR PART TO ABIDE BY ALL THE CONDITIONS HEREIN CONTAINED, AND TO COMPLY WITH ALL ORDINANCES OF CUYAHOGA HEIGHTS, OHIO, AND THE LAWS OF THE STATE OF OHIO RELATING TO THE WORK TO BE DONE THEREUNDER; AND SAID AGREEMENT IS A CONDITION OF SAID PERMIT.

OWNER _____

TELEPHONE NO. _____ **ADDRESS** _____

CONCIL REVIEW

APPROVED: _____ DATE _____