

CITY OF AVON LAKE
APPLICATION FOR PERMIT
Business – Commercial – Industrial – Public Buildings
(Miscellaneous – Third Page)

DO NOT FOLD — PLEASE PRINT OR TYPE

PROPERTY ADDRESS: _____

PERMANENT PARCEL NO. 04 – 00 - _____ - _____ - _____

ESTIMATED VALUE OF PROJECT: _____

Application is hereby
made for a:

- | | | |
|--|---|--|
| <input type="checkbox"/> Zoning Permit | <input type="checkbox"/> Electrical Permit | <input type="checkbox"/> Demolition Permit |
| <input type="checkbox"/> Building Permit | <input type="checkbox"/> HVAC or Ventilating Permit | <input type="checkbox"/> Plan Review |
| <input type="checkbox"/> Sign Permit | <input type="checkbox"/> Plumbing Permit | |

I, _____, hereby certify that I am the owner of the premises for which permits are being applied herein, and that I do hereby authorize _____ to act for me in all matters relating to the work for which permits are issued pursuant to this application.

I do hereby agree that the work done under this application and accompanying drawings, which are a part of this application, shall conform to the Avon Lake Building and Zoning Codes, the Ohio Basic Building Code, where applicable, and all other rules and regulations governing said work. Work performed under this permit shall include only that as detailed in this application.

OWNER	APPLICANT
Signature: _____	Signature: _____
Company: _____	Company: _____
Address: _____	Address: _____
Phone: _____	Phone: _____

NOTICE: A CERTIFICATE OF OCCUPANCY PERMIT SHALL BE APPLIED FOR COINCIDENT WITH THE APPLICATION FOR A BUILDING PERMIT OR THE CHANGE IN USE OF AN EXISTING STRUCTURE.

DO NOT WRITE BELOW THIS LINE

PLANNING COMMISSION APPROVAL (IF REQUIRED) _____	
PERMIT NUMBER: _____	CONDITIONAL OCCUPANCY _____
PERMIT ISSUE DATE: _____	FULL OCCUPANCY _____

THIS APPLICATION MUST BE COMPLETED IN FULL
OR IT WILL BE REJECTED AND RETURNED

SUBMISSION REQUIREMENTS:

- FOUR SETS OF PLANS
ALL WORK MUST COMPLY WITH OBC

- PLOT PLAN

DESCRIPTION OF WORK:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> NEW STRUCTURE | <input type="checkbox"/> ALTERATION |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> REPAIR |

USE GROUP _____ LIVE LOAD _____

CONSTRUCTION TYPE _____ OCCUPANT LOAD _____

FIRE SUPPRESSION _____

SQUARE FOOTAGE

FOUNDATION _____ 1ST FLOOR _____

1ST FLOOR _____ 3RD FLOOR _____

SECTION 106 CONSTRUCTION DOCUMENTS

Where the OBC applicable under Code Section 105.1 of the Administrative Code - Approvals Required – any owner or authorized agent who intends to construct, 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 referenced project are submitted herewith for examination and approval. This signature certifies that I have prepared the plans and specifications to conform with the requirements of the Ohio Building Code (OBC) and Chapter 3781 and 3791 of the Revised Code.

Company _____ Name _____

Ohio Registration No. _____ Signature _____

NOTICE

ALL GENERAL AND SUB-CONTRACTORS ARE REQUIRED TO BE REGISTERED WITH THE CITY OF AVON LAKE BEFORE PERFORMING ANY WORK IN SAID CITY THIS IS IN ADDITION TO ANY LICENSING REQUIREMENT BY THE STATE OF OHIO

General Contractor _____ Phone _____
Avon Lake General Contractor Registration No. _____

Sewer Contractor _____ Phone _____
Avon Lake Sewer Contractor Registration No. _____

Mason Contractor _____ Phone _____
Avon Lake Mason Contractor Registration No. _____

Carpenter Contractor _____ Phone _____
Avon Lake Carpenter Contractor Registration No. _____

Plumbing Contractor _____ Phone _____
Avon Lake Plumbing Contractor Registration No. _____

Electrical Contractor _____ Phone _____
Avon Lake Electrical Contractor Registration No. _____

Heating – Ventilating Contractor _____ Phone _____
Avon Lake Heating – Ventilating Contractor Registration No. _____

MISCELLANEOUS:

WHEN BUILDING PLANS ARE NOT REQUIRED, I.E. SIGNS, COMPLETE THE FOLLOWING:

Application is hereby made to (erect a) (construct a) (install) _____

at _____, by _____

Describe in detail materials used and their application _____
