

APPLICATION FOR BUILDING PERMIT

This form is provided by the Building Industry Association of Ohio as a public service.

PERMIT NUMBER _____

Property Location	Issued in Ohio Under Authority of		
	Auditors Taxing District	Parcel Number	
	Address of Property		
	Subdivision	Lot	
Applicant	Applicants Name	Phone Number	(000) 000-0000
	Email Address	Fax Number	(000) 000-0000
	Owner's Name	Phone Number	(000) 000-0000
	Address		
	Designer's Name	Phone Number	(000) 000-0000
	Address		
	Builder's Name	Phone Number	(000) 000-0000
	Address		
Builder's ID			
Property Information	Type of Improvement	New One-Family Residential	Improvement Cost
	Number of Bedrooms	Heating Fuel	Natural Gas Number of Gas Appliances Per Unit
	Number of Baths	Sewage Disposal	Public Garage Type Attached
	Building Height	Water Supply	Public Number Car Garage
	Building		Zoning
	Unfinished Basement	Lot Area	
	Finished Basement	Total % Occupied by Structure	
	Lower Level	Front Setback	
	1st Floor	Rear Setback	
	2nd Floor	Right Setback	
	3rd Floor	Left Setback	
	Other	Lot Width at Building Line	
Garage	Zoning District		
Deck/Screened In Porch	Existing Use of Property		
Gross Square Feet	Flood Plain <input type="checkbox"/> YES <input type="checkbox"/> NO		
Building Area at Ground Level			
Living Area			
Notes			
Contractor Information	Excavator	License Number	Fee Schedule Initial Occupancy Footage Zoning Alt/Addtn. Plan Exam Gas Piping Other Total
	Plumbing	License Number	
	Electric	License Number	
	HVAC	License Number	
	Fireplace	License Number	
** This section only to be filled out if required by Jurisdiction.			
Applicant Signature	The owner of this building and undersigned, do hereby covenant and agree to comply with all the laws of the State of Ohio and the ordinances of this jurisdiction, pertaining to building and buildings, and to construct the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and certify that the information and statements given on this application, drawings and specifications are to the best of their knowledge, true and correct.		
Signature of Applicant _____			
Office Use	Date Received	Date Received	Date Received
	Date Approved	Date Approved	Date Approved
	Zoning Official	Plans Examiner	Issuing Authority