



BUILDING APPLICATION

City of Englewood, 333 W. National Rd., Englewood, OH 45322
Phone (937) 836-5106 Fax (937) 836-7426



___ RESIDENTIAL (3 sets of plans) ___ COMMERCIAL (4 sets of plans)

Owner	Name: _____ Address: _____
	City, State, Zip: _____ Phone: _____
	E-Mail: _____ Alt Phone: _____
Applicant	Name: _____ Address: _____
	City, State, Zip: _____ Phone: _____
	E-Mail: _____ Alt Phone: _____
Plans By	Name: _____ Address: _____
	City, State, Zip: _____ Phone: _____
	E-Mail: _____ Alt Phone: _____
Contractor	Name: _____ Address: _____
	City, State, Zip: _____ Phone: _____
	E-Mail: _____ Alt Phone: _____

PROJECT DESCRIPTION _____

SITE ADDRESS _____

Project	PARCEL I.D.: _____ CONST. AREA SQ. FT. _____ PROJECT COST \$ _____
	<u>Commercial Use Only</u> : USE GROUP: _____ CONSTRUCTION TYPE: _____ OCCUPANT LOAD: _____
	ELECTRIC SERVICE SIZE _____ Line Drawing Required Over 400 AMP.

REVIEW REQUESTED FOR – Check All That Apply

Review Requested	<input type="checkbox"/> New	<input type="checkbox"/> Building	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Accessory Structure
	<input type="checkbox"/> Addition	<input type="checkbox"/> Electrical	<input type="checkbox"/> Fire Suppression	<input type="checkbox"/> Shed _____ Sq. Ft.
	<input type="checkbox"/> Alteration	<input type="checkbox"/> Gas Piping	<input type="checkbox"/> Exhaust Hood	<input type="checkbox"/> Deck _____ Sq. Ft.
	<input type="checkbox"/> Repair/Replace	<input type="checkbox"/> HVAC	<input type="checkbox"/> Hood Suppression	<input type="checkbox"/> Pool – Above Ground
	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Electrical Service Size	<input type="checkbox"/> Fire Damage	<input type="checkbox"/> Pool – Below Ground
	<input type="checkbox"/> Demolition	<input type="checkbox"/> _____ Amp	<input type="checkbox"/> Fire Place	<input type="checkbox"/> Hot Tub/Spa
	<input type="checkbox"/> Cert. of Occupancy	<input type="checkbox"/> Line Drawing Required over 400 AMP	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Utility Excavation
		<input type="checkbox"/> _____	<input type="checkbox"/> Water - Sewer	

All information contained in this application is true, accurate and complete to the best on my knowledge and I, the "Applicant" as the owner's authorized agent, do hereby agree to complete the project in compliance with relevant building and zoning codes.

APPLICANT SIGNATURE _____ DATE _____

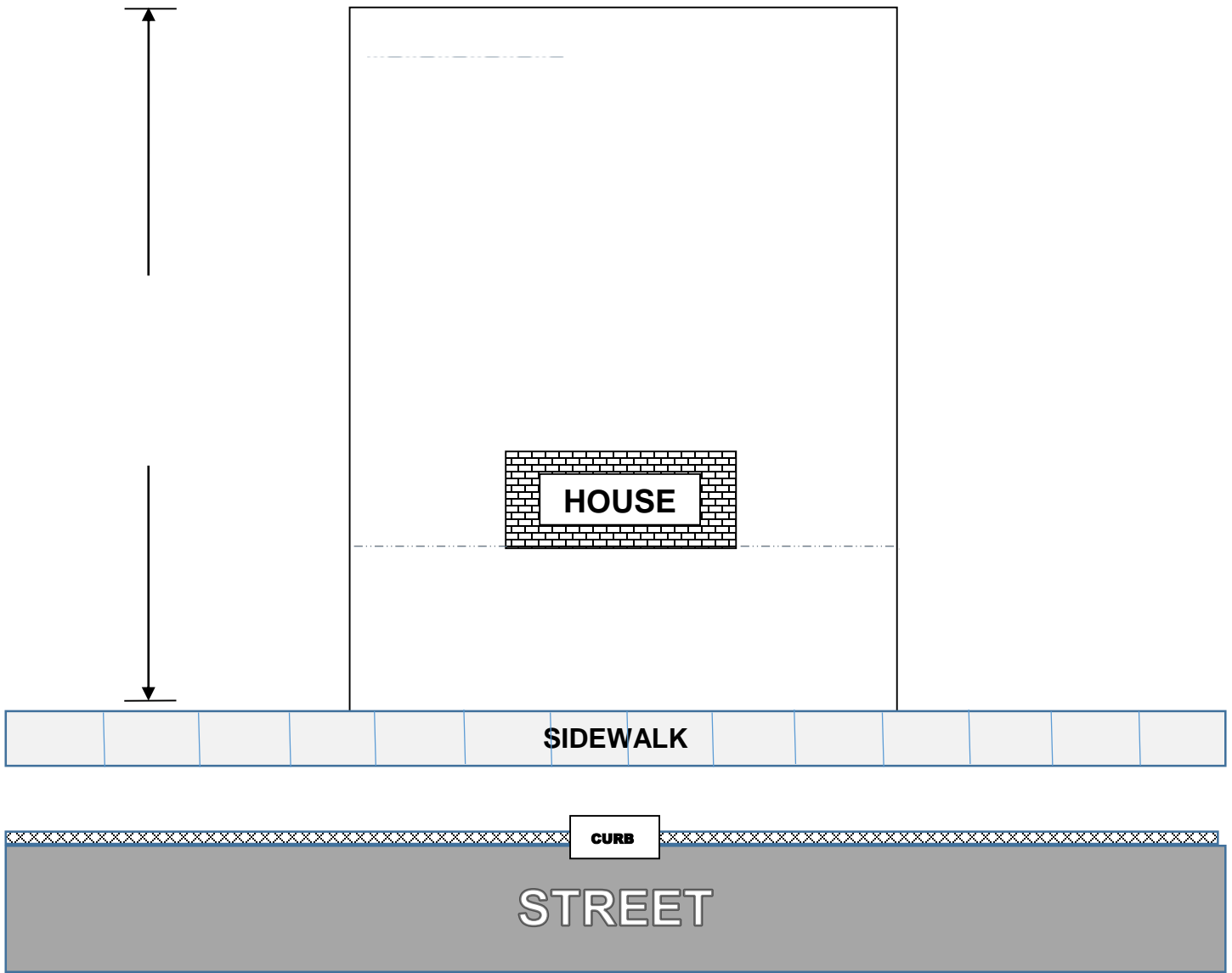
*****OFFICE USE ONLY*****

PAYMENT: \$ _____ REC'D BY: _____ TYPE: CASH CARD CHECK # _____

ZONING APPROVED _____ Zoning Official DATE _____

BLDG. APPROVED _____ Building Official DATE _____

Application #



The Applicant being the Owner or Owner's Agent has submitted construction plans, specifications, and plot plans that are incorporated into and made part of this application. In consideration of the granting of the permit hereby requested, the Applicant agrees to ensure the related work is completed in accordance with the terms of the permit and applicable State and local laws and regulations. The Applicant acknowledges it is the responsibility of the Applicant to verify and comply with all easements, rights of way and plat covenants and restrictions of record affecting the said property. Applicant will notify the Building Inspector upon start of construction, schedule required inspections and will not use or occupy the structure until a Certificate of Occupancy or Completion (full or conditional) has been issued by the Building Inspector. And by the applicant's signature on the front of this document, they certify that the proposed work is authorized by the Owner of Record, that they have been authorized by the Owner to make this application as his Agent.