

Plan Number  
[ ]

APPLICATION FOR PERMITS

APPLICANT - Complete all applicable spaces on this form Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Drawings/ Plans \_\_\_\_\_

Street and number location \_\_\_\_\_ Zip Code \_\_\_\_\_

Table with 7 columns: IDENTIFICATION, NAME, STREET ADDRESS, CITY, ST, ZIP CODE, PHONE NO. Rows include PROPERTY OWNER, CONTRACTOR, MECH. CONTR., and DESIGNER.

Type of Improvement (Check all improvements being applied for)

- BUILDING: New Building, Addition, Alterations, Demolition
REPAIR: Roofing, Tear Off, Overlay, All, Partial, Other Repair
APPURTENANCE: Deck, Shed, Swimming Pool, Sign, Awning, Antenna, Tent, Fence, Other
MECHANICAL: New System, Alterations, Replacement, Unit Size, Kitchen Exhaust, Gas Piping, Refrigerant Piping, Other
FIRE PROTECTION: Sprinkler, Standpipe, UG Fireline, Fire Alarm, Hood Suppression, Other

s.f. [ ]

Gross area -new or altered

Describe proposed work \_\_\_\_\_

Estimated Cost (all labor and materials) \$ \_\_\_\_\_ Constr. Type \_\_\_\_\_ Use Group \_\_\_\_\_

If applying for HVAC concurrently - HVAC Estimated Cost (all labor and materials) \$ \_\_\_\_\_

The owner of this building and undersigned, do hereby covenant and agree to comply with all the laws of the State of Ohio, Hamilton County and the ordinances of the City of Springdale pertaining to buildings and site development, and to construct the proposed improvement 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.

Application by \_\_\_\_\_ Address \_\_\_\_\_ Owner or Agent PLEASE PRINT

Signature \_\_\_\_\_ Phone \_\_\_\_\_ email: \_\_\_\_\_

Payment options: VISA, Mastercard, Discover, Credit Card Number [ ]

Name as it appears on the card \_\_\_\_\_ Charge fees on my credit card: Signature \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ BBS \$ \_\_\_\_\_ CO \$ \_\_\_\_\_ CO BBS \$ \_\_\_\_\_

HVAC Permit Fee \$ \_\_\_\_\_ HVAC BBS \$ \_\_\_\_\_ FEE TOTAL \$ \_\_\_\_\_

PAID AMT \$ \_\_\_\_\_ Ck / Cash / CC

DO NOT WRITE BELOW THIS LINE

Area \_\_\_\_\_ Volume \_\_\_\_\_ Zoning Approval \_\_\_\_\_

Approval Signature \_\_\_\_\_ Date \_\_\_\_\_ Date Iss. \_\_\_\_\_ Number \_\_\_\_\_