



**CITY of
NORTH
OLMSTED**

**APPLICATION FOR PLAN APPROVAL AND GENERAL BUILDING PERMIT
RESIDENTIAL PROJECTS**

North Olmsted Division of Building
5200 Dover Center Road, North Olmsted, Ohio 44070
P: (440) 777-8000 F: (440) 777-5889

TYPE OF PROJECT	SCOPE OF PROJECT (*Additional form required by MEP Contractor)		
New Home <i>\$1,500 Eng. Plan Review Deposit also required</i>	Building	Driveway/Patio	Electrical*
Addition/Alteration	Shed/Detached Garage	Pool	Plumbing*
Building Demolition	Roof/Siding/Windows	Fence	HVAC*
Estimated Project Cost \$ _____ Estimated Completion Date _____		Alteration (sf) _____ Addition (sf) _____	Total Building (sf) _____
PROJECT/BUILDING LOCATION			
Homeowner:			
Street Address:		Is this project/building located within the flood plain? Yes* No *Work in the flood plain may require a flood plain permit application	
BRIEF DESCRIPTION OF THE SCOPE OF WORK COVERED UNDER THIS APPLICATION			
OWNER INFORMATION			
Name of Owner:		Attention:	
Street Address:	City:	State:	Zip Code:
Phone:	Email:		
If a corporation, name of individual authorized to act on behalf of corporation:			Title:
Signature of individual listed above. The applicant listed below is authorized to act as the owner's agent per the RCO. X _____			
CONTRACTOR INFORMATION			
Applicant:		Attention:	
Street Address:	City:	State:	Zip Code:
Phone:	Email:		
If a corporation, name of individual authorized to act on behalf of corporation:			Title:
Homeowner Exception: I certify that I own the subject property and it is occupied or to be occupied as my established residence. All work will be done by me with the assistance only of members of my household per §1317.02(B), except for subcontractors who are registered and licensed as required by §1317.02.			
Signature of individual listed above. X _____			

PERSON RESPONSIBLE FOR PLAN PREPARATION (RCO 106.2)

Name: _____

Street Address: _____	City: _____	State: _____	Zip Code: _____
Phone: _____	Email: _____		
Architect	Engineer	Ohio Registration No. _____	

CERTIFICATION OF APPLICANT

Contractor	Owner	Plan Preparer
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I certify that all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above.

Signature: _____ Print Name: _____ Date: _____

*Drawings sufficient to satisfy RCO 106.1 or as required to fully describe the proposed improvement if not governed by the RCO shall be submitted with this application.

COMPLETE SECTIONS BELOW FOR RESIDENTIAL PROJECTS AS APPLICABLE

FENCE

Type of fence: _____

Total Length (ft.) _____ Maximum Height (ft.) _____

Provide dimensioned site plan of fence installation and picture or drawing description of fence.

ROOFING REPLACEMENT

Is the roof a complete tear off? Yes No (required if 2 or more layers are present)

What type of roof is in place now? Asphalt Wood Shake Slate Other: _____

What type of roofing material will be used? Asphalt Wood Shake Slate Other: _____

Are eaves or soffits vented? Yes No

Type of vents being used to meet ventilation requirements Ridge (sf) _____ Static no. _____

and sf of free air provided by each: Gable (sf) _____ Soffit (sf) _____ Other (sf) _____

SIDING REPLACEMENT

Type of material to be installed: _____ Trim material: _____

Existing type of siding: Vinyl Aluminum Wood Other _____

Insulation added: Yes No If yes, type and R-value: _____

Are existing eaves or soffits vented? Yes No (existing venting must be maintained)

WINDOW AND DOOR REPLACEMENT

Number of windows and doors to be installed: _____

OFFICIAL USE ONLY

Application/Permit Number _____ Issued Date: _____

Permit Cost \$ _____ Plan Review Cost \$ _____

Engineering Plan Review Deposit \$ _____