

CLEVELAND HEIGHTS

APPLICATION FOR RESIDENTIAL BUILDING PERMIT/APPROVAL

City of Cleveland Heights

PERMIT NO. _____

DATE ISSUED: _____

BUILDING WORK HOURS

7:00 A.M. TO 6:00 P.M. MONDAY THRU SATURDAY -
NO WORK ON SUNDAYS AND HOLIDAYS (Cleveland Heights Building Code)

R- _____

GENERAL INFORMATION

ESTIMATED COST OF PROJECT \$ _____

ADDRESS OF CONSTRUCTION _____

OWNER OF PROPERTY _____ PHONE #: _____

OWNER'S ADDRESS _____

CONTRACTOR _____ PHONE #: _____

CONTRACTOR BUSINESS ADDRESS _____

CONTRACTOR REGISTRATION NUMBER _____

ARCHITECT (if applicable) _____

(Name) (Address) (City) (State) (Zip) (Phone)

DESCRIPTION OF PROPERTY AND CONSTRUCTION

STRUCTURE TYPE <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Three Family	WORK LOCATION <input type="checkbox"/> Exterior <input type="checkbox"/> Basement <input type="checkbox"/> 1st Floor <input type="checkbox"/> 2nd Floor <input type="checkbox"/> 3rd Floor	TYPE OF WORK <input type="checkbox"/> New Structure <input type="checkbox"/> Alteration (*Specify Details) <input type="checkbox"/> Repair (*Specify Details) <input type="checkbox"/> Rehabilitation (Scope of Work Letter Req.) <input type="checkbox"/> Fire Repairs (*Specify Details) <input type="checkbox"/> Demolition (*Specify Details)	<input type="checkbox"/> ADDITION (Plans Required) Specify Location _____ <input type="checkbox"/> NEW ROOF MATERIAL _____ <input type="checkbox"/> REROOF MATERIAL _____ <input type="checkbox"/> OTHER _____
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EXTERIOR:

WINDOW REPLACEMENT (Printed Photo's Required)
 Same Style yes no
 Same Size yes no
 Same Color yes no

DECK (Site Plans Required & Zoning Approval)

SHED (Site Plans Required & Zoning Approval)
 Drawings, Brochures or Photos

RETAINING WALL
 New
 Exis
 Repair (*Specify Details)
 Height _____

CHIMNEY
 Repair
 Rebuild

STEPS (Printed Photo's Required)

Location Front Rear Other _____
 Existing Type: Wood / Masonry
 Proposed Type: Wood / Masonry
 Other _____

GARAGE

Demo
 Floor Only (*Specify Details)
 New (Plans Required)
 Siding (Garage Only)
 Repairs (*Specify Details)
 Roofing

FOUNDATION (Location) _____
 Repair New (Plans Required)

PORCH

New (Plans Required)
 Floor Repairs (*Specify Details)
 Repairs (*Specify Details)
 Railings (*Specify Details)
 Porch Enclosure
 Other _____

SWIMMING POOL
 Above Ground
 In Ground

INTERIOR:

Remodel Bathroom Remodel Kitchen Remodel _____
 Move/remove walls (Plans Required) Drywall Only (Sq. Ft. _____)
 Other (*Specify Details) _____

SUPPORT POST
 Specify Location _____

* REPAIR WORK SHALL BE SPECIFIC TO THE REPAIRS - INCLUDE A SCOPE OF WORK LETTER AND PLANS DETAILING THE PROJECT.

TO THE BUILDING COMMISSIONER: This application is submitted for a permit to erect, add to, alter or repair a structure as described in this application and any drawings which accompany it. The acceptance of the permit shall be considered in agreement on the part of the applicant or his agents to comply with the Building and Zoning codes of the City of Cleveland Heights, or other orders, requirements or specifications stated in the permit and per Related Policy Bulletins.

In signing this application, the contractor or owner's agent certifies that the work is authorized by the owner of record.

Authorized Applicant's Signature _____ Print Name _____ Date _____

Applicant is Owner Contractor Owner's agent

DO NOT WRITE BELOW THIS LINE

ADDITIONAL REQUIREMENTS (To be filled out by Staff.)

Other approvals:

Architectural Board of Review Zoning
 Separate permits required for Electrical Plumbing
 Heating/Ventilating Other _____
 Certificate of Occupancy is required/ not required for this project

ATTENTION
 AS THE CONTRACTOR, YOU ARE
 REQUIRED BY LAW (SECTION 109 RCO)
 TO CLOSE THIS PERMIT AFTER YOUR
 WORK IS COMPLETED.
 CALL (216)291-4900 TO SCHEDULE A
 ROUGH-IN AND/OR FINAL INSPECTION.

APPROVAL AND FEES

Application for a building permit is approved (as noted).
 FOR _____ AMOUNT _____

FEES _____

NOTES: _____ TOTAL _____

PER POLICY BULLETIN ATTACHED

BY _____ BUILDING OFFICIAL
 CITY OF CLEVELAND HEIGHTS
 BUILDING DEPARTMENT
 40 SEVERANCE CIRCLE
 CLEVELAND HEIGHTS, OHIO 44118
 (216)291-4900