APPLICATION

PLEASE PROVIDE THE APPLICATION FEE (SEE PAGE 4) AND THREE STAPLED PAPER SETS (MAXIMUM 11" X 17") OF:

- 1. ABR application form
- 2. <u>drawings drawn to scale using standard labeling, dimensioning and drafting conventions (site plan, floor plan, elevations, wall</u> sections, details, and perspectives for new buildings)
- 3. <u>clear, sharp color photos of existing conditions (show complete views of all sides of a house, plus important details) and neighboring buildings</u>
- 4. NOTE: FOR WINDOW REPLACEMENT: Provide "before and after" photo simulations or drafted elevations of each side of the building clearly showing the effect of the windows on the building's design.

NOTE: In addition, please email an Adobe PDF version of the above-listed information to Richard Wong at rwong@clvhts.com.

ZONING:

Planning staff will review ABR cases for zoning compliance. Land use, setbacks, height, and signs are regulated by zoning. Please make sure you address zoning issues we find. Please call Kara, Karen or Richard at the Planning Department at 216-291-4878 with zoning questions. The Zoning Code is at www.clevelandheights.com. ABR and zoning approval are required for a Building Permit.

BUILDING PERMITS:

Certified Building Official Rick Loconti (rloconti@clvhts.com or 216-291-4941) heads the Building Department and is responsible for issuing permits. Changes in the project's drawings required by the ABR must be incorporated before submitting plans for permit. As a separate process from ABR, please submit an application and drawings to the Building Department for Cleveland Heights Building Code and Ohio Building Code reviews. Applicants will be notified by phone or mail about plan approval or plan deficiencies. Construction may not begin until a building permit has been issued.

APPLICATION

Please type or print clearly. Every blank must be filled to apply.

Project Address					
Owner Phone					
Owner's Mailing Address					
Owner's Email Address					
Project: new building addition alteration sign fence					
Project description:					
Plans submitted for (check one): Preliminary Review Approval					
Architect/DesignerPhone					
Architect/Designer's Email Address					
Architect/Designer's Mailing Address					
Contractor Phone					
Contractor's Address					
Contractor's Email Address					
Who will represent the project before the ABR?(A representative must be present for the review.)					
Applicant's Signature					
ABR RECEIPT #					

2020 APPLICATION DEADLINES AND MEETING DATES

	Deadline	Meeting date
JANUARY	12/17	1/7
	1/7	1/22*
FEBRUARY	1/22	2/4
	2/4	2/20*
MARCH	2/20	3/3
	3/3	3/17
APRIL	3/17	4/7
	4/7	4/21
MAY	4/21	5/5
	5/5	5/19
JUNE	5/19	6/2
	6/2	6/16
JULY	6/16	7/7
	7/7	7/21
AUGUST	7/21	8/5*
	8/5	8/18
SEPTEMBER	8/18	9/1
	9/1	9/15
OCTOBER	9/15	10/6
	10/6	10/20
NOVEMBER	10/20	11/3
	11/3	11/17
DECEMBER	11/17	12/1
	12/1	12/15
(JANUARY '21)	12/15	(1/5)

MEETINGS START AT 7:00 PM IN CITY COUNCIL CHAMBERS, 2nd FLOOR OF CITY HALL

^{*} holiday moved date

FEES

Fees for design review by the Architectural Board of Review are established in Section 1311.05 of the Cleveland Heights Building Code and are as follows:

ONE-, TWO-, AND THREE-FAMILY DWELLINGS Completely New Building	\$50.00
Addition, Alteration, Deck or Fence	\$35.00
ALL OTHER BUILDINGS OR STRUCTURES	
Based on Square Feet of Aggregate Floor Area	
Under 2500	\$50.00
2500 to 7500	\$60.00
7501 to 15,000	\$80.00
15,001 or more	\$120.00
Alterations	\$50.00
Signs	\$50.00
Special Meeting	\$200.00
Fees for the Architectural Board of Review are for two appearances. additional fee is required for every appearance after the second.	A \$25.00

CONSENT TO ACCESS PROPERTY

I, the undersigned responsible party (owner, occupant, tenant, or agent for the property owner) of the property described herein, do hereby consent to entry upon said property, at a reasonable time and to the extent necessary, by the City of Cleveland Heights and its officers, employees, and/or agents for the purpose of inspecting said property for compliance with the City's Zoning, Housing, and/or Building Codes. I further certify that I have authority to grant access to said property.

Property A	ddress			
Signature of Responsible Party		Name of Responsible Party (please print)		
I am the:	□ owner	□ occupant	□ tenant	☐ agent for property owner
Telephone	Number		— Dat	re

PLEASE NOTE THAT FAILURE TO CONSENT TO A SITE INSPECTION OF YOUR PROPERTY MAY CAUSE DELAY IN YOUR APPLICATION AND/OR MAY CAUSE YOUR APPLICATION TO BE CONSIDERED INCOMPLETE.