

**CITY OF LOVELAND  
BUILDING/ZONING PERMIT APPLICATION**

APPLICANT – Complete all applicable information.

1. STREET ADDRESS \_\_\_\_\_

2. COUNTY \_\_\_\_\_ Hamilton \_\_\_\_\_ Clermont \_\_\_\_\_ Warren

3. \_\_\_\_\_ Residential Property (CABO) \_\_\_\_\_ Commercial Property (OBBC)

	NAME	STREET ADDRESS	CITY	STATE	ZIP	PHONE/FAX
OWNER:						
CONTRACTOR:						
PLANS BY:						

**4. TYPE OF IMPROVEMENT**

<input type="checkbox"/> Additions	<input type="checkbox"/> Garage	<input type="checkbox"/> New Building
<input type="checkbox"/> Alteration	<input type="checkbox"/> Hood System	<input type="checkbox"/> Pool (Above Ground)
<input type="checkbox"/> Deck	<input type="checkbox"/> HVAC <input type="checkbox"/> Commercial <input type="checkbox"/> Residential	<input type="checkbox"/> Pool (In Ground)
<input type="checkbox"/> Fence	<input type="checkbox"/> Replacement <input type="checkbox"/> New	<input type="checkbox"/> Repairs, replacement
<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil	<input type="checkbox"/> Shed
<input type="checkbox"/> Fire Suppression	<input type="checkbox"/> Moving	<input type="checkbox"/> Sign
		<input type="checkbox"/> Wrecking (demolish)

☐ Other (specify) \_\_\_\_\_  
\_\_\_\_\_

5. OWNERSHIP \_\_\_\_\_ Private \_\_\_\_\_ Public

6. COST Estimate cost of improvement for which this application is being made: \$ \_\_\_\_\_ .00

**7. USE OF THIS BUILDING AND PREMISES:**

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

**8. COMPLETE THIS SECTION FOR NEW BUILDINGS ONLY.**

Type of Sewage Disposal	Type of Water System	Total floor area, exterior dimensions:
<input type="checkbox"/> Public Sewer	<input type="checkbox"/> Public Water	_____
<input type="checkbox"/> Private System (septic tank, etc.)	<input type="checkbox"/> Private (well, cistern)	

The owner of this building and undersigned, do hereby covenant and agree with all the laws of the State of Ohio and the ordinances of the City of Loveland pertaining to building(s), and to construct the proposed building(s) or structure(s) or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and certify that the information and statements given on this application, drawings and specifications to the best of their knowledge, true and correct.

Application by \_\_\_\_\_ Date \_\_\_\_\_  
(Owner or Agent's Signature)

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**DO NOT WRITE BELOW THIS LINE**  
**(Office Use)**

Building/Zoning Approval \_\_\_\_\_ Date Permit Issued \_\_\_\_\_ Permit # \_\_\_\_\_

Permit & Inspection Fee \$ \_\_\_\_\_ Use Group \_\_\_\_\_ Const. Type \_\_\_\_\_ Zoning \_\_\_\_\_ Flood: no \_\_\_\_\_ yes \_\_\_\_\_