

PROJECT #

SHARONVILLE BUILDING DEPARTMENT
APPLICATION FOR PERMIT
10900 Reading Road Sharonville, OH 45241
(513) 563-0033 Phone (513) 563-0617 Fax

DATE

IMPORTANT - Applicant must complete all items listed below.

<u>Type of Improvement</u> Circle	1 - ACC. STRUCTURE	8 - DEMOLITION	15 - FIRE SUPPRESSION	22 - OTHER
	2 - ADDITIONS	9 - DRIVEWAY	16 - GARAGE or DETACH.	23 - POOL
	3 - AWNING	10 - EXTER. ALTER.	17 - GUTTERS/DOWN SPOUTS	24 - PORCH/ENCLOSURES
	4 - BUILDING (NEW)	11 - FENCE	18 - HVAC	25 - PORT. STOR. UNIT
	5 - CANOPY/CARPORT	12 - FENCE-SOLID	19 - INTER. ALTER.	26 - REROOF
	6 - CERT. OCUPANCY	13 - FIRE ALARM	20 - KITCHEN HOOD	27 - SIDING
	7 - DECK	14 - FIRE DAMAGE	21 - MOD. UNIT	28 - TENT

Building Construction Cost	<u>DESCRIBE IMPROVEMENT</u>
a. Building Structure _____	_____
b. Electric _____	_____
c. Plumbing _____	_____
d. Heating & Air _____	_____
e. Suppression, Fire Alarm _____	_____
f. Miscellaneous _____	_____
g. Foundation Only _____	_____
Total Project Cost \$ _____	_____

	NAME	MAILING ADDRESS and ZIP CODE	PHONE #
1. Job Address	//////////////////////////////////// ////////////////////////////////////		//////////////////////////////////// ////////////////////////////////////
2. Owner/ Lessee			
3. General Contractor	License #	Fax #	
4. Architect/ Engineer	Fax #		
5. Other Contractor	License #	Fax #	

<u>Signature of Applicant</u> (PLEASE PRINT NAME)	<u>Address, City, State and Zip Code</u>	<u>Application Date</u>
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Do Not Write in this Section			
Square Footage	_____	Permit #	_____
Permit Fee	\$ _____	Issue Date	_____
Plan Review Fee	\$ _____	Use Group	_____
Fire Dept. Plan Review	\$ _____	Construction Type	_____
Sub Total	\$ _____	Approved By	_____
1% (ORC) / 3% (OBC)	\$ _____	Book	_____
TOTAL PERMIT FEE	\$ _____	Page	_____
Application Fee	\$ _____ (non refundable)	Parcel	_____
TOTAL Due	\$ _____	Zoning District	_____