COMMERCIAL BUILDING PERMIT APPLICATION

CITY OF RICHMOND HEIGHTS
DEPARTMENT OF BUILDING ZONING AND HOUSING
26789 HIGHLAND ROAD, RICHMOND HEIGHTS, OHIO 44143
216.383.6312 FAX 216.383.6319

APPLICATION DATE: ___________________ REGISTRATION YEAR: ___________________

LOCATION OF PROJECT: __________________________________________________________

BUILDING OWNER’S NAME: ______________________________________________________

BUSINESS NAME: __________________________________ PHONE NO: __________________

BUSINESS ADDRESS: __________________________________________________________________

CITY, STATE, ZIP CODE: _________________________________________________________

CONTRACTOR’S CO. NAME: __________________________________ PHONE NO: __________________

DESCRIPTION OF WORK: _________________________________________________________

NATURE OF PROJECT (CHECK ONE)
NEW CONSTRUCTION ☐ ADDITION ☐ ALTERATION ☐ CHANGE OF USE ☐ ARTICLE 32 ☐

TYPE OF CONSTRUCTION (CHECK ONE) PROPOSED USE GROUP (CHECK ONE)
1 A ☐ 1 B ☐ A1 ☐ A2 ☐ A3 ☐ A4 ☐ A5 ☐
2 A ☐ 2 B ☐ 2 C ☐ B ☐ E ☐ F1 ☐ F2 ☐
3 A ☐ 3 B ☐ H1 ☐ H2 ☐ H3 ☐ H4 ☐
4 ☐ ☐ 11 ☐ 12 ☐ 13 ☐ M ☐
5 A ☐ 5 B ☐ R1 ☐ R2 ☐ R3 ☐ R4 ☐
S ☐ S 2 ☐ U ☐

WILL THIS BUILDING BE EQUIPPED WITH FIRE PROTECTION EQUIPMENT? YES ☐ NO ☐

AUTHOR OF PLANS: _____________________________________________________________

STATE OF OHIO REGISTRATION (PROVIDE REGISTRATION NUMBER)

ARCHITECT: ___________________ ENGINEER: ___________________ SPRINKLER SYSTEM DESIGNER: ___________________ OTHER: ___________________

NAME OF FIRM: __________________________________ PHONE: ___________________

STREET ADDRESS: _______________________________________________________________

CITY, STATE, ZIP CODE: _________________________________________________________

TELEPHONE NUMBER: __________________________________________________________

SQUARE FOOT PER FLOOR (OF EFFECTED AREA)
TOTAL ___________________ COST OF WORK COVERED BY THIS APPLICATION $________

TOTAL FEES: $________

APPLICANT (SIGNATURE) ___________________ (DATE) ___________________

APPLICANT (PRINT NAME) ______________________________________________________

A.R.B. PROJECT NUMBER ___________________ APPLICATION NUMBER ___________________

REV. 10/2013