



Department of Building, Zoning, & Housing
26789 Highland Road
Richmond Heights, Ohio 44143-1429
216-383-6312 Fax: 216-383-6319
richmondheightsohio.org

Civil Engineering Plan Review and Permitting Application

Request

Form 201:

Description of Request: _____

Project Valuation: _____

Property Information:

Property Address (If Known): _____
Business Name: _____
Property Location: _____
Parcel Number: _____ Lot Number: _____
Subdivision Name: _____ MCR: _____

Property Owner Information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Alternate: _____ E-mail: _____

Check here if proposed construction will be owner/builder
(Residential projects only)

Property Owner and Applicant Authorization:

The owner or authorized agent for the owner of the subject lot or parcel guarantees the information and plans provided are correct to the best of their knowledge including recorded lot dimensions and structure locations.

Owner/Agent Printed Name

Date

Owner/Agent Signature

Date

Internal Use Only

Received By: _____ Date: _____

Permit Number(s): _____ Application Number(s): _____



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Engineering Submittal Check List

Submittal of Civil Plans for 1st Review

Form 202:

- Completed and signed application (Form 201 and 202)
- Three (3) paper copies and one electronic copy (IN PDF Format) of all reports; signed and sealed by an Ohio Professional Engineer
- In addition to any other fees or deposits required by sections 1325.021 and other sections of the Codified Ordinances, the Building Commissioner shall charge and the Director of Finance shall collect a deposit in the amount of two percent (2%) of the City Engineer's estimate of cost of the construction, the subject of the building permit or other application, but not less than one thousand (\$1,000) unless otherwise approved by the City Engineer. **Please review 1325.021 Cash Deposit for Additional Professional Services Fees.**
- Make all checks payable to the City of Richmond Heights and mail to Department of Building, Zoning, & Housing at 26789 Highland Road, Richmond Heights, Ohio 44143-1429
- Amount of Check _____ Check Number _____

LIST SUBMITTAL TYPE(S) Included in This Application:

OFFICE USE ONLY:

Received By: _____ Date: _____