

# CITY OF MIDDLEBURG HEIGHTS

## Building Division

15700 BAGLEY ROAD, MIDDLEBURG HEIGHTS, OHIO 44130

Phone (440) 234-2218 • Fax (440) 234-9092



### PLANNING COMMISSION PROJECT APPROVAL APPLICATION

1. Projects must be received at least **30 Days prior to being placed on the agenda**. Projects must be reviewed and receive approval from the following departments, where required: Engineering, Building, Architectural, City Planner, and Fire. Appropriate fees and plans **must** be submitted with the application. Architectural Review and Engineering Review fees must be paid before the plans will be sent out. Projects will not be placed on the agenda until the fees are paid the reviews are complete. Incomplete submittals may be refused/returned.
2. Complete the **entire** form below and submit the signed original with the following:
  - A. Twelve (12) complete copies of the collated plans - please list any variances and the dates they were granted  
**\*NOTE:** It is the Applicant's responsibility to collate any revised drawings
  - B. A disc containing PDF files of all drawings (or you may email the files)
  - C. A check made payable to the "City of Middleburg Heights" for the proper amount
  - D. Proof of property owner's approval
3. Pursuant to Section 1127.04 of the Zoning Code of Middleburg Heights, Ohio; the following schedule of fees is hereby adopted:
  - A. Initial Consultation.....\$40.00
  - B. Preliminary Approval.....65.00
  - C. Final Approval and Others.....125.00 **AND**
  - D. Architectural Review Deposit.....250.00 *Deposits will be used to pay the City Engineer/Architect. The*
  - E. Engineering Review Deposit.....500.00 *Finance Dept. will issue a check for any remaining money.*

All fees, other than Engineer and Architect review deposits that were overestimated, shall be nonrefundable and nontransferable. Any substantial alteration to the original plans will be considered a new proposal and will be charged at the scheduled rate.

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Name of the Business Involved \_\_\_\_\_ Phone \_\_\_\_\_

Address of the Property Involved \_\_\_\_\_ Permanent Parcel No. \_\_\_\_\_

Property Owner Name, Address, Phone \_\_\_\_\_

Agent's Name, Address, Phone, and Email \_\_\_\_\_

\_\_\_\_\_

Type of Project \_\_\_\_\_

\_\_\_\_\_  
Applicant's Name (Please Print)

\_\_\_\_\_  
Applicant's Signature

FOR CITY USE ONLY

PC AGENDA NO.
RECEIVED
CHECK NO./AMT.

\_\_\_\_\_  
Building Department Approval

Revised November 2008