COMMERCIAL BUILDING PERMIT APPLICATION

CITY OF MIDDLEBURG HEIGHTS
Building Department
15700 Bagley Road
Middleburg Heights, OH 44130
Phone (440) 234-2218 • Fax (440) 234-9092
E-mail: building@middleburgheights.com

Application is hereby made for the construction as described in detail below at the location given. The acceptance of the permit herein applied for shall constitute an agreement on the part of the undersigned to abide by all conditions therein contained and to comply with all ordinances of the City of Middleburg Heights and the laws of the State of Ohio relating to the work to be done there under and said agreement is a condition of said permit. Furthermore, I agree to notify the Division of Building for inspections as follows: **FOOTERS BEFORE POURING; FRAMING; ELECTRICAL WIRING, PLUMBING, HEATING PIPES, ETC. BEFORE COVERING; FOUNDATIONS AND DRAINS BEFORE BACKFILLING; AND FINALS FOR OCCUPANCY.**

<p style="text-align:center;color:red;">***INCOMPLETE FORMS WILL DELAY PLAN APPROVALS ***</p>

Project Address: _____

Property Owner Name: _____

E-mail: _____ **Phone #:** _____

Property Owner Address: (If different from above): _____

Job Description: _____
_____
_____

Estimated Construction Cost:

Building: $ _____
Electric: $ _____
Plumbing: $ _____
HVAC: $ _____
TOTAL: $ _____

NOTE: BEFORE ANY JOB IS STARTED, ALL CONTRACTORS MUST BE REGISTERED AND A PERMIT MUST BE APPROVED AND ISSUED. ANY JOB STARTED BEFORE APPROVAL AND ISSUANCE OF A PERMIT SHALL BE SUBJECT TO A PENALTY.

Contractor: _____ **Contact Person:** _____

Contractor Address: _____

E-mail: _____ **Phone #:** _____

Applicant Signature: _____

APPROVAL:

_____ _____
BUILDING COMMISSIONER **DATE**

LIST CONTRACTORS FOR PROJECT

Asphalt/Paving: _____

Address: _____

_____

Phone: _____

Concrete: _____

Address: _____

_____

Phone: _____

Electric: _____

Address: _____

_____

Phone: _____

HVAC: _____

Address: _____

_____

Phone: _____

Landscaping: _____

Address: _____

_____

Phone: _____

Plumbing: _____

Address: _____

_____

Phone: _____

Siding: _____

Adddress: _____

_____

Phone: _____

OTHER: _____

Address: _____

_____

Phone: _____

Carpentry: _____

Address: _____

_____

Phone: _____

Drywall: _____

Addresss: _____

_____

Phone: _____

Excavation: _____

Address: _____

_____

Phone: _____

Insulation: _____

Address: _____

_____

Phone: _____

Mason/Foundation: _____

Address: _____

_____

Phone: _____

Roofing: _____

Address: _____

_____

Phone: _____

Structural Steel: _____

Address: _____

_____

Phone: _____

OTHER: _____

Address: _____

_____

Phone: _____