

RESIDENTIAL 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.**

***INCOMPLETE FORMS WILL DELAY PLAN APPROVALS ***

Project Address: _____

Property Owner Name: _____

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

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

Job Description: _____

Please give sq. ft. of new construction/additions: _____

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: _____

Address: _____

Phone: _____

OTHER: _____

Address: _____

Phone: _____

Carpentry: _____

Address: _____

Phone: _____

Drywall: _____

Address: _____

Phone: _____

Excavation: _____

Address: _____

Phone: _____

Insulation: _____

Address: _____

Phone: _____

Mason/Foundation: _____

Address: _____

Phone: _____

Roofing: _____

Address: _____

Phone: _____

Structural Steel: _____

Address: _____

Phone: _____

OTHER: _____

Address: _____

Phone: _____