

COMMERCIAL BUILDING PLAN APPROVAL APPLICATION



CITY OF MIDDLEBURG HEIGHTS

Building Department

15700 Bagley Road

Middleburg Heights, OH 44130

Phone (440) 234-2218

Website: middleburgheights.com

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 ***

Please submit this completed application with required items noted on separate Non-Residential Plan Approval Application.

TYPE OF PROJECT: New Building Construction Addition Alteration Repair

SQ. FT. OF PROJECT: _____

PROJECT LOCATION:

Street Address _____ Unit/Suite/Building # _____ Tenant/Company Name _____ Phone Number _____

BUILDING/PROPERTY OWNER INFORMATION:

Owner Name _____ Phone Number _____

Street Address _____ City _____ State _____ Zip _____ E-mail _____

JOB DESCRIPTION: _____

ESTIMATED CONSTRUCTION COST: Building \$ _____ Electric \$ _____
Plumbing \$ _____ Heating \$ _____

TOTAL \$ _____

APPLICANT INFORMATION: (OWNER OR OWNER'S AUTHORIZED AGENT – IF AGENT, PLEASE SUBMIT WRITTEN AUTHORIZATION)

Applicant/Company Name _____ Phone Number _____

Street Address _____ City _____ State _____ Zip _____ E-mail _____

CERTIFICATION:

I certify that I am: Owner Owner's Authorized Agent (contractor or design professional)

All information contained in this application is true, accurate and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my (Applicant) e-mail address and copied to the Owner's email address.

Signature _____ Printed Name _____ Date _____

FOR CITY USE ONLY

DATE RECEIVED: WALK IN MAIL IN PROCESSED BY: _____

APPROVED: _____
Building Commissioner

DATE: _____