APPLICATION FOR COMMERCIAL BUILDING PERMIT



CITY OF MIDDLEBURG HEIGHTS Division of Puilding

Division of Building

15700 BAGLEY ROAD, MIDDLEBURG HEIGHTS, OHIO 44130
Phone (440) 234-2218 • Fax (440) 234-9092
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TO THE BUILDING COMMISSIONER:

With this detailed application and plans, I construction as described in detail below at the agreement on the part of the undersigned to abid Middleburg Heights and the laws of the State of said permit. Furthermore, I agree to notify the FRAMING; ELECTRICAL WIRING, PLUNDRAINS BEFORE BACKFILLING; AND FRAMING AND	location given. The by all conditions of Ohio relating to the Building Department IBING, HEATING	ne acceptance of therein contained work to be done at for inspections FPIPES, ETC. B	the permit herein applied for shall constitute and to comply with all ordinances of the City there under and said agreement is a condition as follows: FOOTERS BEFORE POURIN	e an y of n of NG;
			N APPROVALS*	
Project Address	Suite/Unit #			
Tenant Name	Phone #			
Property Owner Name			Phone #	
Property Owner Address				
Sq. Ft. of Construction Space:	Permanent Parcel Number:			
Job Description:				
Estimated Construction Cost:	Building: Electric: Plumbing: HVAC: TOTAL:	\$		
NOTE: BEFORE ANY JOB IS STARTED, ALL CONTRASTARTED BEFORE APPROVAL AND ISSUANCE OF A				JOB
GENERAL CONTRACTOR				_
CONTRACTOR AGENT			CELL #	
CONTRACTOR ADDRESS				
CONTRACTOR PHONE #	FAX #			
E-MAIL ADDRESS				
AUTHORIZED SIGNATURE				_
I HEREBY APROVE THE ABOVE APPLICATION THE REQUIRED APPROVED DRAWINGS.	ON FOR A PERMIT	TO PERFORM	THE ABOVE DESCRIBED WORK SUBJECT	ТО
BUILDING COMMISS	IONER		DATE	

LIST CONTRACTORS FOR PROJECT

Asphalt/Paving:	Carpentry:	
Address:	Address:	
Phone:	Phone:	
Concrete:	Drywall:	
Address:	Addresss:	
Phone:	Phone:	
Electric:	Excavation:	
Address:	Address:	
Phone:	Phone:	
HVAC:	Insulation:	
Address:	Address:	
Phone:	Phone:	
Landscaping:	Mason/Foundation:	
Address:	Address:	
Phone:	Phone:	
Plumbing:	Roofing:	
Address:	Address:	
Phone:	Phone:	
Siding:	Structural Steel:	
Adddress:	Address:	
Phone:	Phone:	
OTHER:	OTHER:	
Address:	Address:	
Phone:	Phone:	