



BUILDING & HOUSING DEPARTMENT

6154 Mayfield Road, Mayfield Heights, OH 44124

Phone: 440-442-2626, ext. 210 Fax: 440-442-7662

APPLICATION FOR COMMERCIAL BUILDING PERMIT

JOB ADDRESS:			
JOB NAME:			
Bldg. No:	Suite No:	Floor:	Bldg. Descr. (store, church, etc):
PROPERTY OWNER:			
OWNER'S ADDRESS:			
CITY, STATE, ZIP:			PHONE:

SCOPE OF PROJECT:	TYPE OF PROJECT
Building General (New/Addition/Alterations)	New Construction
Mechanical (HVAC/Electrical/Plumbing)	Building Addition
Sprinkler System	Building Repairs/Alterations
Fire Alarm	Change of Occupancy/Use

TOTAL SQUARE FOOTAGE:	
Basement:	
First Floor:	
Additional Floors:	
Total Square Footage:	

FIRE PROTECTION SYSTEMS TYPE:	
Building Sprinkler	Smoke Detection
Limited Area Sprinkler	Fire Detection
Building Fire Alarm	N/A
Hood Suppression	Other:

PROPOSED OBBC USE GROUP CLASSIFICATION:											
A-1	A-4	E	H-1	H-4	I-3	R-1	R-4				
A-2	A-5	F-1	H-2	I-1	I-4	R-2	S-1				
A-3	B	F-2	H-3	I-2	M	R-3	S-2				
U Mixed use groups? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Separated <input type="checkbox"/> Non-separated											

CONSTRUCTION TYPE:					
1	2A	3A	4	5B	
1B	2B	3B	5A		

Included with my submittal is energy code compliance. *(not required for fire submittals)*

JOB DESCRIPTION:

Project for: ___ new occupant ___ existing occupant ___ vacant space other: _____

Estimated Cost of Construction: _____

FIRE ALARM SUBMITTAL: Total # of Devices: _____

FIRE PROTECTION SUBMITTAL: Total Number of Heads: _____

REGISTERED DESIGN PROFESSIONAL:

Architect: Ohio Registration No: _____

Engineer: Ohio Registration No: _____

Certified Fire Protection System Designer: Ohio Registration No: _____

COMPANY: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL ADDRESS (MUST BE PROVIDED): _____

CONTRACTOR: to be determined

COMPANY: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL ADDRESS: _____

APPLICANT:

COMPANY: _____ **PHONE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

EMAIL ADDRESS: _____

The acceptance of the permit herein applied for shall constitute an agreement on the part of the applicant to abide by all the conditions herein contained and to comply with all the ordinances of the City of Mayfield Heights and the laws of Ohio relating to the work to be done hereunder; and said agreement is a condition of said permit.

SIGNATURE OF APPLICANT: _____

PRINT NAME: _____

TITLE _____ **DATE** _____