

APPLICATION

FOR CERTIFICATE OF PLAN APPROVAL OR CHANGE OF USE & OCCUPANCY

APP. NO. _____

1. OWNERS NAME				2. FLOORS				
		NAME OF FIRM			Use Group	Fire Grading (hrs)	Occupancy Load	Floor Live Load
		STREET ADDRESS		Cellar				
MANDATORY ZIP CODE		CITY, TOWN ETC.		Basement				
		TELEPHONE NUMBER		Floor				
3. PLANS PREPARED BY (Check One)		OHIO REGISTRATION NO.		Floor				
A. OHIO REGISTERED ARCHITECT <input type="checkbox"/>				Floor				
B. OHIO REGISTERED ENGINEER <input type="checkbox"/>				Floor				
				Floor				
				Floor				
				Floor				
4. A. NAME OF JOB AND DESCRIPTION OF BUILDING-STORE, CHURCH ETC.				5. SPECIFY EXACT LOCATION OF PROJECT				
				STREET ADDRESS				
				LOCATION,				
				LANDMARKS, ETC.				
C. NATURE OF CONSTRUCTION (Check One) Addition <input type="checkbox"/> Alteration <input type="checkbox"/> New <input type="checkbox"/> Change of Use & Occupancy <input type="checkbox"/>								
6. TYPE OF CONSTRUCTION		7. Compliance with energy code A. Submit documentation with this application.			9. CHECK APPROPRIATE FLOOR(S)		TOTAL SQUARE FT. PER FLOOR	
<input type="checkbox"/> 1A <input type="checkbox"/> 1B					A BASEMENT			
<input type="checkbox"/> 2A <input type="checkbox"/> 2B <input type="checkbox"/> 2C					B. FIRST FLOOR			
<input type="checkbox"/> 3A <input type="checkbox"/> 3B <input type="checkbox"/> 3C					C. 2, 3, 4, 5, 6 (Circle No.)			
<input type="checkbox"/> 4A <input type="checkbox"/> 4B					D. ADDITIONAL FLOORS			
				E. TOTAL SQUARE FEET A + B + C + 0				
8. USE GROUP CLASSIFICATION				APPROVAL CONTINGENT UPON THE FOLLOWING:				
Assembly:		Institutional:		APPROVAL DATE		PLAN EXAMINER		
A-1-A _____		1-1 _____						
A-1-B _____		1-2 _____						
A-2 _____		Mercantile: M _____		AREA CHECK		O.K. REC'D.		
A-3 _____		Residential (Motels. Apt.)		ARCH. FEE CHECK		ENG. FEE CHECK		
A-4 _____		R-1 _____		PLANS MAILED		PLANS DEL'D.		
A-5 _____		R-2 _____						
Business: B _____		R-3 _____						
Factory: F _____		Storage: S _____						
High Hazard: H _____		Temporary & Misc. _____						
		T _____						

SIGNATURE OF APPLICANT _____

TITLE
DATE RECEIVED _____