

Commercial Plan Approval and/or Building Permit Application

ALL FIELDS WITH * MUST BE COMPLETED TO PROCESS APPLICATION, USE "N/A" WHEN APPLICABLE

*Name of Business/ Project: _____

*Project Address _____ City _____ Zip _____

*Township _____ Lot Number _____ Parcel Number (_____)

*Project Specifications: New Structure Addition Int. Alt Ext. Alt Sprinkler Alarms Hood Other _____

*Construction Type _____ *Use Group(s) _____ ; Specific Use _____

*Affected Area(s) of project: Basement _____ 1st _____ 2nd _____ 3rd _____ other _____

*Owner: Name _____ Ph _____ Cell _____ Fax _____

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

ALL PROJECT CORRESPONDANCE WILL BE SENT TO THE FOLLOWING:

*Contact: Name _____ Ph _____ Cell _____ Fax _____

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

Contractor: Name _____ Ph _____ Cell _____ Fax _____

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

*Design Professional: Architect / Engineer _____ Ohio Registration _____

*Address _____ City _____ State _____ Zip _____

*Phone _____ Cell _____ Fax _____ *E-mail _____

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I, * _____ Print Name _____, declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the applicable State of Ohio laws and/or building codes and Mahoning County resolutions. I am the owner or I have been given authorization from the property owner to obtain this permit. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit herein applied, and shall not be construed to allow any construction upon said premises or use thereof in violation of any applicable State of Ohio/ Federal laws and/ or Mahoning County resolutions or to excuse the owner or his or her successors in title from complying therewith.

I understand that by applying for this permit, the plans and specifications, and the representations therein contained, are made a part of this application. Furthermore I am consenting to; the fees in accordance with the Building Department Fee Schedule, the inspection of this property and to the entry onto the property by inspectors of the authority having jurisdiction for the purpose of performing the necessary inspections for the duration of the permit, and to a deferred plan examination due to expedited phased applications. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material, fact or expression of material, or any change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the Chief Building Official, shall constitute sufficient grounds for the revocation of such permit.

**APPLICATION SHALL BE ACCOMPANIED BY FOUR (4) SETS OF SEALED DRAWINGS AND \$125.00 NON-REFUNDABLE FEE
ALL FEES SHALL BE PAID IN FULL & ALL DOCUMENTS SIGNED BEFORE A BUILDING PERMIT WILL BE ISSUED.**

*Signature of Owner or Owner's Agent Date

Mahoning County Building Department, 50 Westchester Dr. Room 201, Youngstown OH 44515
Phone 330-270-2894 Fax 330-270-2898 www.mahoningcountyoh.gov