



CITY OF AMHERST

480 Park Avenue, Amherst Ohio 44001 • ph. (440) 988-3734 fax (440) 988-3764

APPLICATION FOR RESIDENTIAL BUILDING PERMIT

Date: _____ New: _____ Addition: _____ Alteration: _____ Repair: _____

_____ BUILDING _____ ELECTRICAL _____ HVAC/R _____ PLUMBING

_____ FIRE SUPPRESSION _____ OTHER (describe) _____

Property Owner _____	Phone _____
Address _____	PP: _____ - _____ - _____ - _____
Contractor _____	Phone _____
Total Estimated Cost _____	Square Footage of Work _____
----- Describe the full scope of work to be performed as applied for on this permit application. Provide drawings, sketches and/or pictures as required. _____ _____ _____	

SUBMITTAL REQUIREMENTS:

- Two (2) complete construction plans including, as applicable per the permit application, plumbing isometrics, HVAC heat/loss calculations and ductwork layouts, electrical layouts, site plan and TOPO (or combination site plan/TOPO)
- Two (2) grading plans (for new construction and/or additions)

Permit shall include only such work as detailed in this application. Permit is valid for twelve (12) months from the date of issue unless an extension is otherwise granted by the Building Official.

24-HOUR NOTICE REQUIRED FOR ALL INSPECTIONS

ALL other residential inspections shall be conducted between 8:30 AM and 3:30 PM Monday through Friday
Electrical inspections shall be conducted after 4:00 PM - Monday/Wednesday/Friday

ALL contractors and sub-contractors are required to be properly registered with the Amherst Building Department prior to starting any work on the project subject to this application. Provide list on back of form.

I hereby agree to the conditions of this Application for Residential Building Permit and to comply with all Ordinances of the City of Amherst, and the Law of the State of Ohio, relating to work to be completed thereunder. I further agree to abide by the interpretations of said codes and ordinances as interpreted by the Code Official having authority.

_____ Signature of Applicant/Agent

_____ Print Name

****Please include a self addressed stamped envelop if you wish to have your permit mailed to you****

PERMIT CARDS WILL NOT BE FAXED

LIST OF CONTRACTORS WORKING ON PROJECT

GENERAL	_____	PHONE _____
UTILITIES	_____	PHONE _____
EXCAVATION	_____	PHONE _____
FOUNDATION	_____	PHONE _____
CONCRETE FLATWORK	_____	PHONE _____
MASONRY	_____	PHONE _____
ROUGH CARPENTRY	_____	PHONE _____
ELECTRICAL	_____	PHONE _____
PLUMBING	_____	PHONE _____
HVAC/R	_____	PHONE _____
FIRE SUPPRESSION	_____	PHONE _____
STRUCTURED WIRING	_____	PHONE _____
SECURITY	_____	PHONE _____
INSULATION	_____	PHONE _____
ROOFING	_____	PHONE _____
SIDING	_____	PHONE _____
GUTTERS	_____	PHONE _____
DRYWALL	_____	PHONE _____
PAINTING	_____	PHONE _____
FLOORING	_____	PHONE _____
LANDSCAPING	_____	PHONE _____
other/specify	_____	PHONE _____
other/specify	_____	PHONE _____
other/specify	_____	PHONE _____
other/specify	_____	PHONE _____