



# BUILDING APPLICATION

City of Englewood, 333 W. National Rd., Englewood, OH 45322  
Phone (937) 836-5106 Fax (937) 836-7426



RESIDENTIAL (Digital OR 2 sets of plans)

COMMERCIAL (Digital OR 4 sets of plans)

REQUIRED

SITE ADDRESS \_\_\_\_\_ Occupant \_\_\_\_\_

Project Description \_\_\_\_\_

Project Area (Sq. Ft.) \_\_\_\_\_ Estimated Cost \_\_\_\_\_

Project	Plans By	Owner	Name: _____	Address: _____
			City, State, Zip: _____	Phone: _____
			E-Mail: _____	Alt Phone: _____
Project	Plans By	Applicant	Name: _____	Address: _____
			City, State, Zip: _____	Phone: _____
			E-Mail: _____	Alt Phone: _____
Project	Plans By	Contractor	Name: _____	Address: _____
			City, State, Zip: _____	Phone: _____
			E-Mail: _____	Alt Phone: _____
OCCUPANT _____ PARCEL I.D.: _____				
<u>Commercial Use Only:</u> USE GROUP: _____ CONSTRUCTION TYPE: _____ OCCUPANT LOAD: _____				
ELECTRIC SERVICE SIZE _____ Line Drawing Required Over 400 AMP.				

**REVIEW REQUESTED FOR – Check All That Apply**

Review Requested	<input type="checkbox"/> New	<input type="checkbox"/> Building	<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Exhaust Hood
	<input type="checkbox"/> Addition	<input type="checkbox"/> Electrical	<input type="checkbox"/> Antenna	<input type="checkbox"/> Fire Alarm
	<input type="checkbox"/> Alteration	<input type="checkbox"/> Electrical Service Size	<input type="checkbox"/> Concrete	<input type="checkbox"/> Fire Place
	<input type="checkbox"/> Demolition	<input type="checkbox"/> _____ Amp	<input type="checkbox"/> Deck	<input type="checkbox"/> Fire Restoration
	<input type="checkbox"/> Repair/Replace	<input type="checkbox"/> Line Drawing Required	<input type="checkbox"/> Fence	<input type="checkbox"/> Fire Suppression/Sprinkler
	<input type="checkbox"/> Cert. of Occupancy	<input type="checkbox"/> 400 Amp +	<input type="checkbox"/> Hot Tub/Spa	<input type="checkbox"/> Hood Suppression
	<input type="checkbox"/> Change of Use	<input type="checkbox"/> HVAC	<input type="checkbox"/> Pool	<input type="checkbox"/> Roof
	<input type="checkbox"/> Civil/Zoning	<input type="checkbox"/> Gas Piping	<input type="checkbox"/> Shed	<input type="checkbox"/> Water - Sewer
		<input type="checkbox"/> Utility Excavation	<input type="checkbox"/> Solar Panels	<input type="checkbox"/> Other: _____

All information contained in this application is true, accurate and complete to the best on my knowledge and I, the "Applicant" as the owner's authorized agent, do hereby agree to complete the project in compliance with relevant building and zoning codes.

APPLICANT  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

PAYMENT: \$ \_\_\_\_\_ REC'D BY: \_\_\_\_\_ TYPE: CASH CARD CHECK # \_\_\_\_\_ CC LINK

ZONING APPROVED \_\_\_\_\_ Zoning Official DATE \_\_\_\_\_

Application #

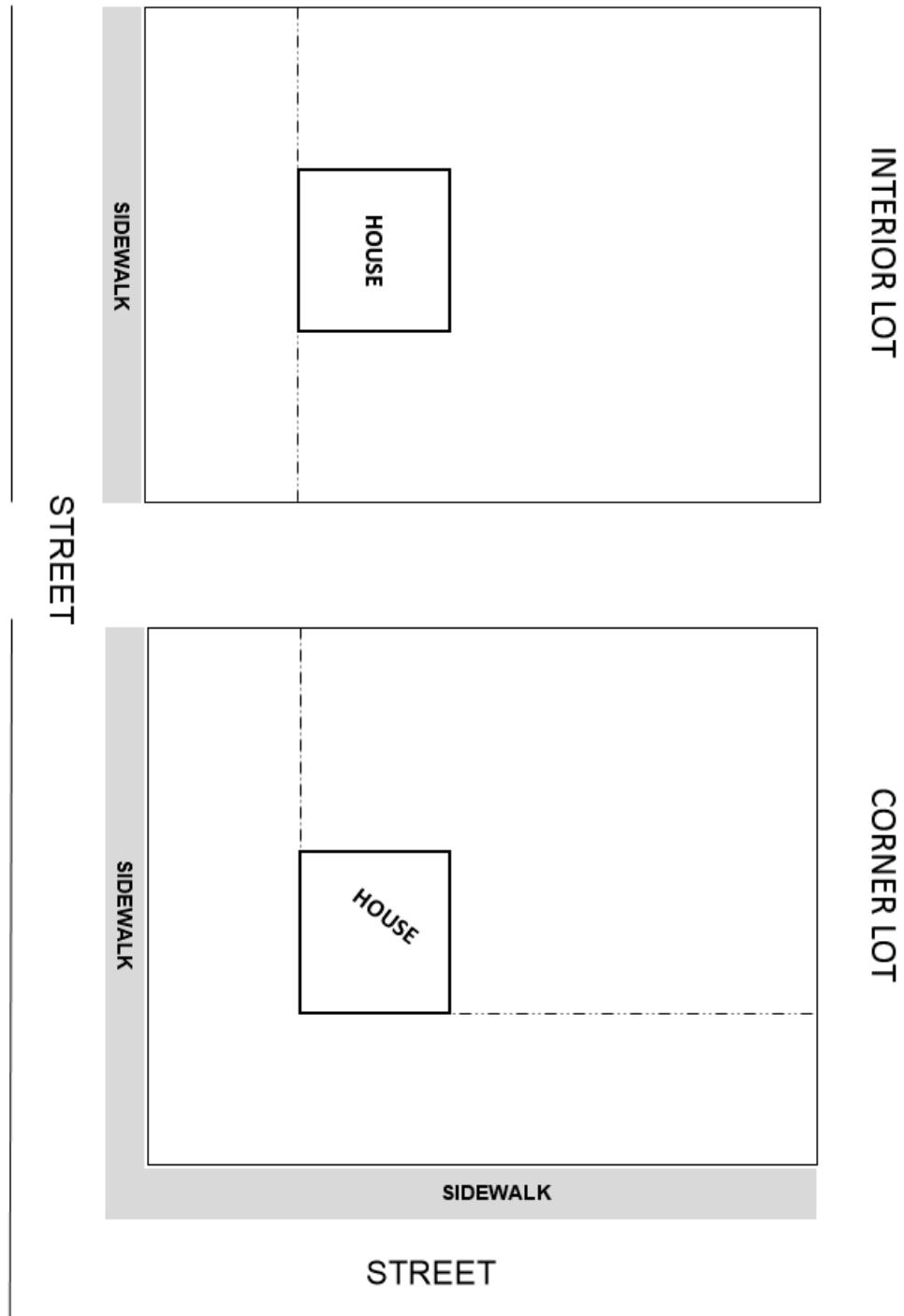
BLDG. APPROVED \_\_\_\_\_ Building Official DATE \_\_\_\_\_

We encourage completed applications and plans to be submitted digitally by emailing to: [powell@englewood.oh.us](mailto:powell@englewood.oh.us)

A payment link will be emailed to you for any application fees. Cash, cards, and checks payable to City of Englewood also accepted in person.

To assist us in determining compliance with applicable zoning requirements, please illustrate the location of the proposed projects on the diagram below.

Also please show location of accessory structures and other landmarks or reference points.



**NOTES:**

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The Applicant being the Owner or Owner's Agent has submitted construction plans, specifications, and plot plans that are incorporated into and made part of this application. In consideration of the granting of the permit hereby requested, the Applicant agrees to ensure the related work is completed in accordance with the terms of the permit and applicable State and local laws and regulations. The Applicant acknowledges it is the responsibility of the Applicant to verify and comply with all easements, rights of way and plat covenants and restrictions of record affecting the said property. Applicant will notify the Building Inspector upon start of construction, schedule required inspections and will not use or occupy the structure until a Certificate of Occupancy or Completion (full or conditional) has been issued by the Building Inspector. And by the applicant's signature on the front of this document, they certify that the proposed work is authorized by the Owner of Record, that they have been authorized by the Owner to make this application as his Agent.