



## APPLICATION FOR COMMERCIAL BUILDING PERMIT PLAN REVIEW

DATE OF SUBMISSION: \_\_\_\_\_

**READ THE FOLLOWING INSTRUCTIONS AND INFORMATION BEFORE COMPLETING THIS TWO (2) PAGE FORM**

1. All drawings and specifications, including plot plans must be submitted electronically through our website ([www.lakecountyohio.gov](http://www.lakecountyohio.gov)) or by emailing our office (LCBD@lakecountyohio.gov). There is also a plan submittal fee due that **must** be paid at the time of submission. (See fee sheet or call the Building Dept for amount due.) Someone from our office will contact you within 24 business hours to take payment via credit card or electronic check over the phone.
2. All submittals must include plot plan, elevations, floor plans, elevator enclosures, complete wall sections showing footer, foundation, floor, walls, and roof construction indicating all structural members, size, spacing, material, etc. Mechanical and Electrical drawings and specifications must be included. The name and address of author shall be plainly printed in the lower right hand corner of all plans or drawings.
3. All plans submitted shall bear sufficient information to determine compliance with the Ohio Building Code. Drawings shall also indicate clearly the principle use or occupancy of the building or structure. Where more than one type of use or occupancy is intended, the location and floor area for such uses or occupancies shall be clearly shown on plans.
4. The proposed work must be done in accordance with approved plans, specifications, codes, and standards. **Separate permits, which may be required for the proposed project, include electrical, HVAC, gas piping, hydronics, and refrigeration (these fees are paid by the general contractor at the time the initial building permit is issued). HOWEVER, YOU WILL STILL BE RESPONSIBLE FOR HAVING YOUR SUBCONTRACTORS COMPLETE & SUBMIT THE APPROPRIATE PERMIT APPLICATIONS.** Additionally, separate drawings, approvals and fees that may be needed include: hood, hood suppression, fire alarm, and fire sprinkler.
5. It is the duty of the General Contractor to insure that all required inspections are scheduled and all work installed has been approved by the Lake County Building Department prior to proceeding to the next phase of construction. The General Contractor is responsible to obtain a final inspection at the completion of the project.
6. This permit becomes null and void if work or construction authorized is not commenced within 12 months, or if construction or work is suspended or abandoned for a period of 180 consecutive days at any time after work is commenced.
7. I hereby certify that I have read and examined this application and that all information is true, accurate, and complete. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I authorize the Lake County Building Department to enter this property for the purpose of site inspections for the duration of this project.
8. **FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE, SECTION 2921.13(A)(5), A MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP TO SIX (6) MONTHS IMPRISONMENT AND A FINE OF \$1,000 OR BOTH. By signing the application you and the entity you represent are agreeing to be obligated and pay for any additional review time and other fees associated with this project. You are further agreeing that failure to pay within 30 days of being billed may result in legal action and refusal of all future applications**

**OWNER:**

NAME: \_\_\_\_\_  
 NAME OF FIRM: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 TEL# ( ) \_\_\_\_\_ FAX# ( ) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

**SUBMITTER:**

NAME: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_  
 NAME OF FIRM: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 TEL# ( ) \_\_\_\_\_ FAX# ( ) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

**DESIGN PROFESSIONAL:**

NAME: \_\_\_\_\_  
 NAME OF FIRM: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 TEL# ( ) \_\_\_\_\_ FAX# ( ) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

**GENERAL CONTRACTOR:**

PRINTED NAME: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_  
 NAME OF FIRM: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 TEL# ( ) \_\_\_\_\_ FAX# ( ) \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

**Plans Prepared By:**      **Name / Ohio Reg. No.**

Registered Architect \_\_\_\_\_  
 Registered Engineer \_\_\_\_\_

LAKE COUNTY BUILDING DEPARTMENT

APPLICATION FOR COMMERCIAL BUILDING PERMIT PLAN REVIEW

READ INSTRUCTIONS BEFORE COMPLETING FORM - Page 2 of 2 - PLEASE PRINT OR TYPE

PROJECT NAME: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

ADDRESS OF CONSTRUCTION: \_\_\_\_\_

CITY/TOWNSHIP: \_\_\_\_\_ PERM PARCEL #: \_\_\_\_\_

IN THE FLOODPLAIN: YES NO PLUMBING: YES NO

SEPTIC - New/Existing: Yes No WELL - New/Existing: Yes No

EST. COST OF CONSTRUCTION: \_\_\_\_\_ SUBMITTAL FEE AMOUNT ENCLOSED: \_\_\_\_\_

PROJECT TYPE: (Check all that apply) [ ]NEW [ ]ADDITION [ ]ALTERATION [ ]CHANGE OF USE [ ]DEMOLITION [ ]OTHER \_\_\_\_\_

DETAILED WORK DESCRIPTION: \_\_\_\_\_

IDENTIFY SQUARE FOOTAGE FOR THIS PROJECT: TOTAL SQ. FTG OF ALL FLOORS: \_\_\_\_\_

Basement: \_\_\_\_\_ 1st Flr: \_\_\_\_\_ 2nd Flr: \_\_\_\_\_ 3rd Flr: \_\_\_\_\_ 4th Flr: \_\_\_\_\_ Other: \_\_\_\_\_

ZONING PERMIT #: \_\_\_\_\_ FIRE DEPT. COMM. DATE RECEIVED: \_\_\_\_\_

WELL OR PUBLIC WATER: \_\_\_\_\_ APPROVED WELL LOG #: \_\_\_\_\_

UTILITIES APPROVAL DATE: \_\_\_\_\_ SEPTIC APPROVAL DATE: \_\_\_\_\_

STORMWATER APPROVAL DATE: \_\_\_\_\_ SOIL & WATER APPROVAL DATE: \_\_\_\_\_

PROPOSED STRUCTURE:

Use Group (Check all that apply)

- [ ]A1 [ ]A2 [ ]A3 [ ]A4 [ ]A5 [ ]B [ ]E [ ]F1 [ ]F2 [ ]H1 [ ]H2 [ ]H3 [ ]H4 [ ]H5 [ ]I1 [ ]I2 [ ]I3 [ ]I4 [ ]M [ ]R1 [ ]R2 [ ]R3 [ ]R4 [ ]S1 [ ]S2 [ ]U

Mixed Use Option(s) / Separate Structure(s)

[ ]Non-Separated [ ]Separated - Hour Rating \_\_\_\_\_ [ ]Fire Wall - Hour Rating \_\_\_\_\_

Type of Construction:

- [ ]1A [ ]1B [ ]2A [ ]2B [ ]3A [ ]3B [ ]4 [ ]5A [ ]5B

Fire Protection & Alarm Systems:

Fire Suppression [ ]None [ ]Partial [ ]Total [ ]Required [ ]Non-Required

Fire Alarm [ ]None [ ]Partial [ ]Total [ ]Required [ ]Non-Required

EXISTING STRUCTURE:

Use Group: (Check all that apply)

- [ ]A1 [ ]A2 [ ]A3 [ ]A4 [ ]A5 [ ]B [ ]E [ ]F1 [ ]F2 [ ]H1 [ ]H2 [ ]H3 [ ]H4 [ ]H5 [ ]I1 [ ]I2 [ ]I3 [ ]I4 [ ]M [ ]R1 [ ]R2 [ ]R3 [ ]R4 [ ]S1 [ ]S2 [ ]U

[ ]Non-Separated [ ]Separated- Hour Rating \_\_\_\_\_ [ ]Fire Wall- Hour Rating \_\_\_\_\_

Type of Construction:

- [ ]1A [ ]1B [ ]2A [ ]2B [ ]3A [ ]3B [ ]4 [ ]5A [ ]5B [ ]Fire

Protection & Alarm Systems:

Fire Suppression [ ]None [ ]Partial [ ]Total [ ]Required [ ]Non-Required

Fire Alarm [ ]None [ ]Partial [ ]Total [ ]Required [ ]Non-Required

ALL FEES ARE NONREFUNDABLE