



City of Lakewood
Housing and Building Division

COMMERCIAL

FOR OFFICE USE ONLY

12650 DETROIT AVENUE
 LAKEWOOD, OH 44107
 (216) 529-6270 • Fax: (216) 529-5930

Project Application **COMMERCIAL**

APPLICANT MUST COMPLETE ALL APPLICABLE ITEMS BELOW

PROJECT ADDRESS: _____ **OR** **Permanent Parcel Number:** _____

FLOOR: _____ **SUITE:** _____ **BLDG#:** _____ **CONDO** Yes No

RELATED VIOLATION CASE: _____ **DATE:** _____

RELATED PROJECT APPLICATION : _____ - _____

SCOPE OF PROJECT (Check all that apply):

- New _____ SF Addition _____ SF Water Controlling
- Alteration Garage _____ SF Waterproofing
- Fence Correct Violations Temporary Use
- Demolition Paving _____ SF Swimming Pool _____ SF
- Deck Other (Please specify): _____
- Change of Use (Indicate former use): _____

USE DESCRIPTION (1 Family, Warehouse, etc.):

PROJECT DESCRIPTION (Include scope, dimension, location): _____ Plans Attached

See Reverse Side for ELEC, HVAC, PLMB

Permits Requested: BLDG ELEC PLMB HVAC

CONSTRUCTION COST:

New/Addition: = Alterations: =
 Electrical: = Plumbing: =
 HVAC: = **TOTAL JOB COST:** = \$

Application No.: _____

Zoning District: _____

Application Type: _____

Application Status: _____

Total Cost: _____

Public Bldg. Flag: Yes No

Inspector Dept.: C H Apt

Assigned Inspector: _____

Master Plan No.: _____ Bldg/Seq: _____

Work Description Codes:

Plan Received By: _____

Plan Review Fee: Y N State 3%: Y N

Project Plans: N/A Not Provided Incomplete
 Submitted Rejected Approved

Construction Type: _____

Occupancy Type: _____

Permit Type:	Approved By:	Permit Fees:
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

State 3% Fee:

Approvals:	Initials:	Ref Date/Docket
BLDG:	_____	_____
Zoning:	_____	_____
Planning:	_____	_____
BBS/ARB:	_____	_____
PW/Engineer:	_____	_____
Health:	_____	_____
Fire:	_____	_____
Water/Sewer:	_____	_____

BUILDING PROJECT CONTACTS

Property Owner: _____ **Phone:** _____

Mailing Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

Subcontractor _____ **License/Reg. No.:** _____

General Contractor: _____ **Phone:** _____

Mailing Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

Architect/Engineer: _____ **Phone:** _____

Mailing Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make the application as his authorized agent and we agree to conform to all laws of this jurisdiction.

Projected Completion Date: _____

 SIGNATURE OF CONTRACTOR / OWNER

 DATE



**City of Lakewood
Housing and Building Division**

FOR OFFICE USE ONLY

Project Permit Specifications

Application No.: _____
 Application Type: _____
 State 3% Fee: Yes No
 Assigned Inspector: _____

APPLICANT MUST COMPLETE ALL APPLICABLE ITEMS BELOW

PROJECT ADDRESS: _____ OR Permanent Parcel Number: _____

ELECTRICAL PERMIT

Items	Qty	Cost per	Extended cost
Base Fee		\$30.00	\$30.00
Each 120 volt receptacle		3.00	
Each fixture outlet		3.00	
Each outlet or receptacle in excess of 120 volts		12.00	
Motors (each unit): 1/4 HP or less		10.00	
1/3 hp to and including 3/4 HP		15.00	
7/8 HP to and including 5 HP		20.00	
Over 5 HP		25.00	
X-ray machines or equipment		50.00	
Corrections or Alterations		20.00	
Panel, services, related equipment, and disconnects		50.00	
Low voltage smoke and/or fire alarm systems		50.00	
Subcontractor Name:		Total	

PLUMBING PERMIT

Items	Qty	Cost per	Extended cost
Base Fee		\$30.00	\$30.00
Lavatories, sinks, laundry trays, bath tubs, showers, standpipes, combination fixtures, urinals, water closets, floor drains, area drains, yard drains, refrigerator drains, dishwashers, sterilizers, dental chairs, water filters, ejector, sump pumps, garbage grinders, grease interceptor, and each three feet or fraction thereof of gang shower length, per each unit		3.00	
Gas Piping: For each outlet		5.00	
Each indoor sprinkler head		5.00	
Each outdoor sprinkler head		2.00	
Each inside leader		3.00	
Each air admittance valve		10.00	
Hot water storage tanks: Up to and including 150 gallon capacity		5.00	
151 gallon and up to and including 300 gallon capacity		8.00	
301 gallon and more		10.00	
Each drain or sewer per 100 feet of aggregate length or part thereof according to diameter:			
Up to and including 6 inches in diameter		10.00	
8 inch diameter		15.00	
10 inch diameter		20.00	
12 inch diameter		25.00	
Potable water piping per 100 feet of aggregate length or part thereof (excluding service line governed by Water Dept.)		10.00	
Subcontractor Name:		Total	

HVAC PERMIT

Unit	Qty	Make	Model	BTU's/Tons of Cooling	Type of Fuel	New or Replacement
Warm Air Furnace						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Boiler						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Unit Heater						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Heat Pump						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Air Conditioner						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Solar						<input type="checkbox"/> New <input type="checkbox"/> Replacement
Other						<input type="checkbox"/> New <input type="checkbox"/> Replacement

If new whole house A/C, cost is: \$ _____ Increase in heating BTU's: _____ (Add \$40.00 Base Fee)

Subcontractor Name: _____ Permit Fee: \$ _____