

**NEW CONSTRUCTION/ADDITION PROCEDURE**

1. Contact Engineering Services at 419-245-1339 for **Address** assigned to the structure. Legal description can be obtained from Lucas County Auditor at 419-213-4420. Notify all subcontractors to use this address for permits.
2. If the structure is in a designated historical district, contact the Toledo/Lucas County Plan Commission at 419-245-1200. A Certificate of Appropriateness is required before a Permit can be issued.
3. Complete a 1) Building Permit Application Form, 2) Commercial Plan Review Form, and 3) Occupancy request Form. Submit with items 4 through 9 below to the One Stop Shop. Please fill out completely to avoid delays. If the Contractor is not known at time of application, this information must be provided before the permit can be issued.
4. Fees:
  - a) Building Permit Application: Base Fee of \$60, plus \$0.17 per gross square foot up to 3,500 sq ft., plus \$.0.15 per gross square foot over 3,500 sq ft., plus 3% state surcharge
  - b) Plan Review Fee: \$100 or \$200 if 50,000 sf or greater plus 3% state surcharge
  - c) Final Occupancy Fee: \$65 Temporary Occupancy Fee: \$50
5. Two (2) sets of construction plans sealed and signed by an Architect or Engineer licensed in the state of Ohio which include:
  - a) Site Plan
  - b) Construction drawings based on Ohio Building Code to include
    1. Total floor plan layout.
    2. Wall sections and elevations.
    3. Foundation plans & framing details.
    4. Heating plans
    5. Plumbing plans
    6. Electrical plans
    7. Utility Plans
6. Provide additional 8 sets of detailed site/utility plans sealed and signed by an Engineer licensed in Ohio to distribute for review and approval by Engineering Services and Transportation Departments. These should include sanitary, storm, water & transportation (parking, curb cuts, etc).
7. Provide three sets of landscape plans at time of application. Bond amount to be set by the Toledo/Lucas County Plan Commission and submitted at time of permit issuance (419-245-1200).
8. Complete a Water tap application and pay required fee: 1" = \$675, 1-1/2" = \$870, 2" = \$1300. For larger taps the fees will increase and inspection fee will be incurred for length of service.
9. Over the Curb Bond is required (bond form provided by One Stop Shop). \$18 fee at time of application.
10. Complete Sidewalk/Apron permit application and pay fee at One Stop Shop.  
Fee: \$5 <40SF, \$10 40 to 100SF, \$15 >100SF
11. Complete Curb Cut permit application and pay fee at One Stop Shop.  
Fee: up to 20ft \$2.00/ft; each foot over 20ft \$3.00/ft
12. Permits for heating, air conditioning, pressure piping, plumbing, and electrical must be secured by a contractor licensed in the State of Ohio and registered in the City of Toledo. Sewer permits (sanitary and storm) need to be applied for by the licensed contractor doing that work.
13. Permits cannot be issued for construction work in Toledo without an established City of Toledo Income Tax Account in good standing (Certificate of Tax Compliance) for the contractor performing the work. This is **not** your Federal ID#. To get your Certificate of Compliance, call 419-245-1662. The Certificate must be submitted to the One Stop Shop before a permit can be issued.
14. The Toledo Lucas County Health Department must review plans for all food service operations. Contact them at 419-213-4100 (Consumer Health) if there is any food prepared and/or sold on site (groceries, snacks, sit down, carryout). A permit cannot be issued for food service operations without their approval.
15. If an existing building needs to be demolished or removed from the property, please obtain Demolition Permit Procedure.
16. You are required to display your Building Permit Placard and keep your approved plans on site until a Final Certificate of Occupancy has been issued. **Inspections cannot be performed if approved plans are not on site. Building, Electrical, Mechanical, Refrigeration and Fire Inspectors must give approval before the occupancy can be granted.**
17. Do Not Occupy the structure until all final inspections (Building, electrical, mechanical, refrigeration and fire inspection) are approved and a Certificate of Occupancy has been issued.

Forms Needed:

Building Permit Application  
Commercial Review Form  
Procedure for obtaining a Certificate of Occupancy  
City of Toledo Tax ID form  
Performance Bond  
Over the Curb Bond Form  
Food Facility Planning Guide

**Monitor Your PENDING Application by visiting our online permit web site at:**

[www.velocityhall.com/toledo](http://www.velocityhall.com/toledo)

Click on **Check/Research Permits** on the right side of screen

Under **Look up Permits/Projects**: click on either **By Address** or **Permit Number** and fill in information.

Click on **Status** under the Detail bar. You will see the required agencies and they will show either approved or not approved. After all agencies appear as Approved, you may pick up your permit. You will need to pay any additional fees due at time permit is picked up. You can also monitor your inspection results at this location.

(Do not write in these spaces)

Appeal Case No. ....  
Date ....., 20 ....  
Approved ....  
Disapproved .....

# CITY OF TOLEDO DIVISION OF BUILDING INSPECTION BUILDING PERMIT

Log No. .... Tr. No. ....

Zoning  
District .....

I have received the card file maintained by the Division of Inspection and have determined that this application for a building permit  
 does,  does not (check one) require Historic District Commission review.

(Title)

THIS PERMIT IS NOT VALID UNLESS THIS BOX BEARS SIGNATURE

4 Family/Commercial  
 1,2,3, Family

## General Information

Comm. Initial ..... (All entries must be made by the applicant, and in ink or indelible pencil.)

Location, ownership and detail must be correct, complete and legible. A separate application is required for each building. Three (3) sets of plans and Specifications must be filed with each application. One Permit set is filed with Division of Inspection and one Permit set must be kept continually on job. All sets of plans and Specifications must bear the name of architect or engineer. Set of plans shall consist of drawings to scale (such as 1/8" or 1/4" equal one foot) of plat plan, basement and foundation plan, first floor plan, second floor plan, etc., elevations and scale section, either print or original drawing. Complete floor plans drawn to scale must be submitted for all change of occupancy whether Permit is required or not. Valuation is total cost of general contract including material and labor. Exclude cost of mechanical and electrical which are separate permits.

This permit does not authorize installation of any electrical or mechanical systems. Separate permits are required.

Job Address  
Number & Street \_\_\_\_\_ Unit No. \_\_\_\_\_ Location on the \_\_\_\_\_ side  
Legal Description of Property \_\_\_\_\_ Addition  
Division

Owner \_\_\_\_\_ Ph. \_\_\_\_\_  
Street Address City State Zip

Contractor \_\_\_\_\_ Ph. \_\_\_\_\_  
Street Address City State Zip

Contractor License Number \_\_\_\_\_

Architect or Engineer \_\_\_\_\_ Ph. \_\_\_\_\_  
Supervision Yes No Street Address City State Zip

Architect or Engineer's Email Address:

Type of Building \_\_\_\_\_ Specific Occupancy \_\_\_\_\_ Single  
 Family \_\_\_\_\_ Type of Construction \_\_\_\_\_

Class of Work – New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Demo \_\_\_\_\_

Description of Work \_\_\_\_\_

Method of Disposal of Construction Waste Material \_\_\_\_\_

Other Installation – Electrical Service \_\_\_\_\_ Plumbing \_\_\_\_\_ Heat Type \_\_\_\_\_ Fuel Type \_\_\_\_\_ Air Cond \_\_\_\_\_

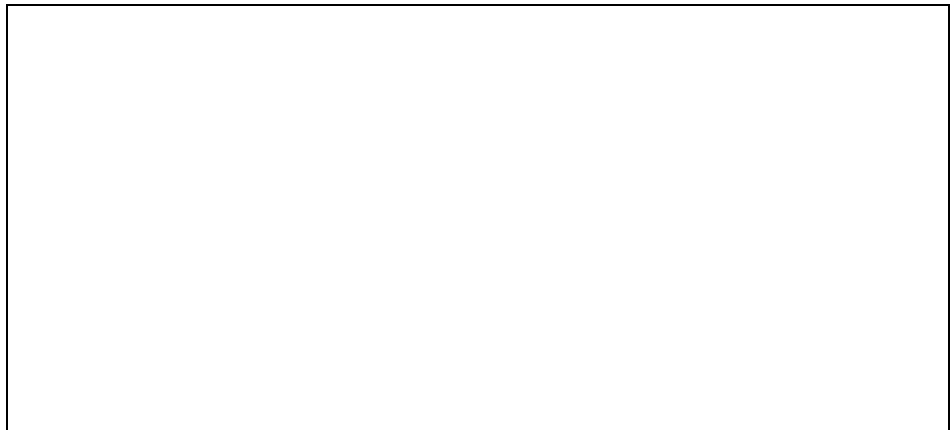
### LOT SIZE:

Width Front ..... ft. .... in.  
Depth ..... ft. .... in.  
Area ..... sq. ft.

### BUILDING SIZE

Width ..... ft. .... in.  
Depth ..... ft. .... in.  
Area ..... sq. ft.  
Number of Stories .....  
Height ..... ft. .... in.  
Volume ..... cu. Ft.

PLOT PLAN  
(Additions and Accessory Bldgs.)



Valuation .....  
Permit Fee \$ .....  
3% State Surcharge .....  
Permit Total .....

Water/Sewer Killed .....  
Water Permit Number .....  
Over the Curb  
Permit Number .....

Approved by .....  
Date .....

WARNING The approval of plans procured by misrepresentation of facts or conditions, misstatements in application or through mistakes or improper action by any officer or employee of this department, does not legalize any illegal construction or agreement.  
IN CONSIDERATION OF THE GRANTING OF THIS PERMIT, I, or we, agree to save the City of Toledo, harmless from any and all damages. I, or we, do hereby covenant and agree to construct said work in all respects in compliance with the provisions of the Statutes of the State of Ohio and the Ordinances of the City of Toledo, and that all statements as made are correct and true, and that all orders of Division of Building Inspection will be complied with.

Signature of Owner

(VOID unless receipted)

Signature of Contractor or Authorized Agent

City Tax I.D. Number



**Main Office**  
635 N. Erie St.  
Toledo, OH 43624-1317  
(419) 213-4100  
Fax: (419) 213-4017  
Email: boardofhealth@co.lucas.oh.us

**Western Clinic Site**  
330 Oak Terrace Boulevard  
Holland, Ohio 43528-8993  
(419) 865-0196  
Fax: (419) 865-9237

David Grossman, M.D.  
Health Commissioner

Larry J. Vasko, M.P.H.  
Deputy Health Commissioner

Lucas County Regional Health District Board Members

John J. Newton, M.D., President  
A. Jackson Smith, Vice-President  
Joyce F. Chapple, M.P.A.  
Mary Gregory, R.N.  
Richard Lehman  
Ruth M. Lewandowski

Doni Miller  
Joan R. Mossing, R.N.  
A. Debra Nicotra, PhD.  
Alan Ruffell, R.S.  
Patricia Wilcox, R.N.  
Donna A. Woodson, M.D.

**FOOD FACILITY PLANNING GUIDE**

All proposed Food Service Operations and Food Establishments must submit plans for review by the Toledo-Lucas County Health Department. They should include:

- 1) Submit a site plan showing nearest cross streets, lot lines, type of water supply, type of sewage disposal placement of dumpsters for storage of garbage and zoning information.
- 2) Submit one (1) copy of the floor plan of the proposed establishment. The floor plan must be drawn at 1/4" to one (1) foot scale. The floor plan must show the location of all food equipment and also indicate all doors, windows and exits.
- 3) Submit a list of surface finishes specifying material used. Include a finish of walls, floors, ceilings, counters and shelving.
- 4) Submit a list of all food equipment. Specify the manufacturer and model number of each piece of equipment. Include the testing agency (such as N.S.F.) Seal number as found on the equipment. We recommend that no equipment be purchased until plans have been approved.
- 5) Submit a proposed menu listing of foods to be served. Show foods, which are to be cooled and reheated.
- 6) Plans must show type of ventilation over cooking equipment such as fryers and grills and in restrooms. Show ventilation over dishwashing machines to remove heat and moisture.
- 7) Utility wire and pipes must be enclosed within walls and columns. Pipes and wires should never be located on the floor but can be secured to wall at least six (6") inches off the floor.
- 8) A three (3) compartment sink with two (2) drain boards must be provided for washing and sanitizing utensils and a hand washing sink must be provided in the food preparation area. A mop sink must be provided somewhere in the building. A two (2) compartment food preparation sink may be required if extensive food preparation is planned.
- 9) Indicate type of lighting on the plans. At least fifty (50) food candles of light must be available on all food preparation surfaces and in all utensil washing areas.
- 10) Lights must be shielded in food storage areas, preparation, and display areas and in utensil and equipment cleaning and storage areas. Shatter resistant bulbs may also be used.

**AN EQUAL OPPORTUNITY EMPLOYER**

The Toledo-Lucas County Health Department operates in accordance with Title VI of the Civil Rights Act of 1964  
Visit us on the web at: [www.co.lucas.oh.us/health](http://www.co.lucas.oh.us/health)

LICENSES/PERMIT-FEES  
EFFECTIVE 2003

Food Service Operation Program

Licenses Due March 1<sup>st</sup>

Commercial Under 24,999 Feet

C1S	\$199.00
C2S	\$226.00
C3S	\$446.00
C4S	\$569.00

Non-Commercial Under 24,999

N1S	\$99.00
N2S	\$113.00
N3S	\$223.00
N4S	\$285.00

Commercial Over 25,000 Feet

C1L	\$294.00
C2L	\$310.00
C3L	\$1140.00
C4L	\$1209.00

Non-Commercial Over 25,000 Feet

N1L	\$ 147.00
N2L	\$ 155.00
N3L	\$ 570.00
N4L	\$ 604.00

Mobile	\$88.00
Vending(each location)	\$31.00
Plan Review	\$230.00
Temporary Commercial	\$41.00
Temporary Non-Commercial	\$20.00

**Penalty fee 25% on license fee only or \$50.00 which is the lesser**

## Plans & Specifications

Each food service operator is responsible for submitting all plans and specifications. Of course, in practice, those assisting an operator often submit them on the authority.

It's best to consult the local health department before preparation of plans. Approval of both plans and specifications is necessary before construction begins. By law, the health department must take action-in-writing –within 30 days after receiving plans and specifications.

Type of Plan & Specification	Where to Submit	Copies Required
Food Service Operations	The local health department having jurisdiction over the operation	1
Water Supply & Sewage Disposal System	District office of the Ohio Environmental Protection Agency	3
Plumbing	Where there is a local plumbing code, to local authorities	See local authorities
	In the absence of such a code, to chief Plumbing Inspector, Bureau of Environmental Health, P.O. Box 118, Ohio Department of Health, Columbus, Ohio 43216.	2
Building	Where there is a local building code, to local authorities	See local building authorities
	In the absence of local building code, to Ohio Department of Industrial Relations, Division of Factory and Building, 2323 W. fifth Avenue, Columbus, Ohio 43216	Write Ohio Department of Industrial Relations
Zoning	Local zoning authorities	See local authorities.

### Building Inspection and Plumbing

Please contact the appropriate officials listed below for requirements:

City of Oregon  
689-7071

City of Maumee  
Building & Zoning Inspection  
897-7075

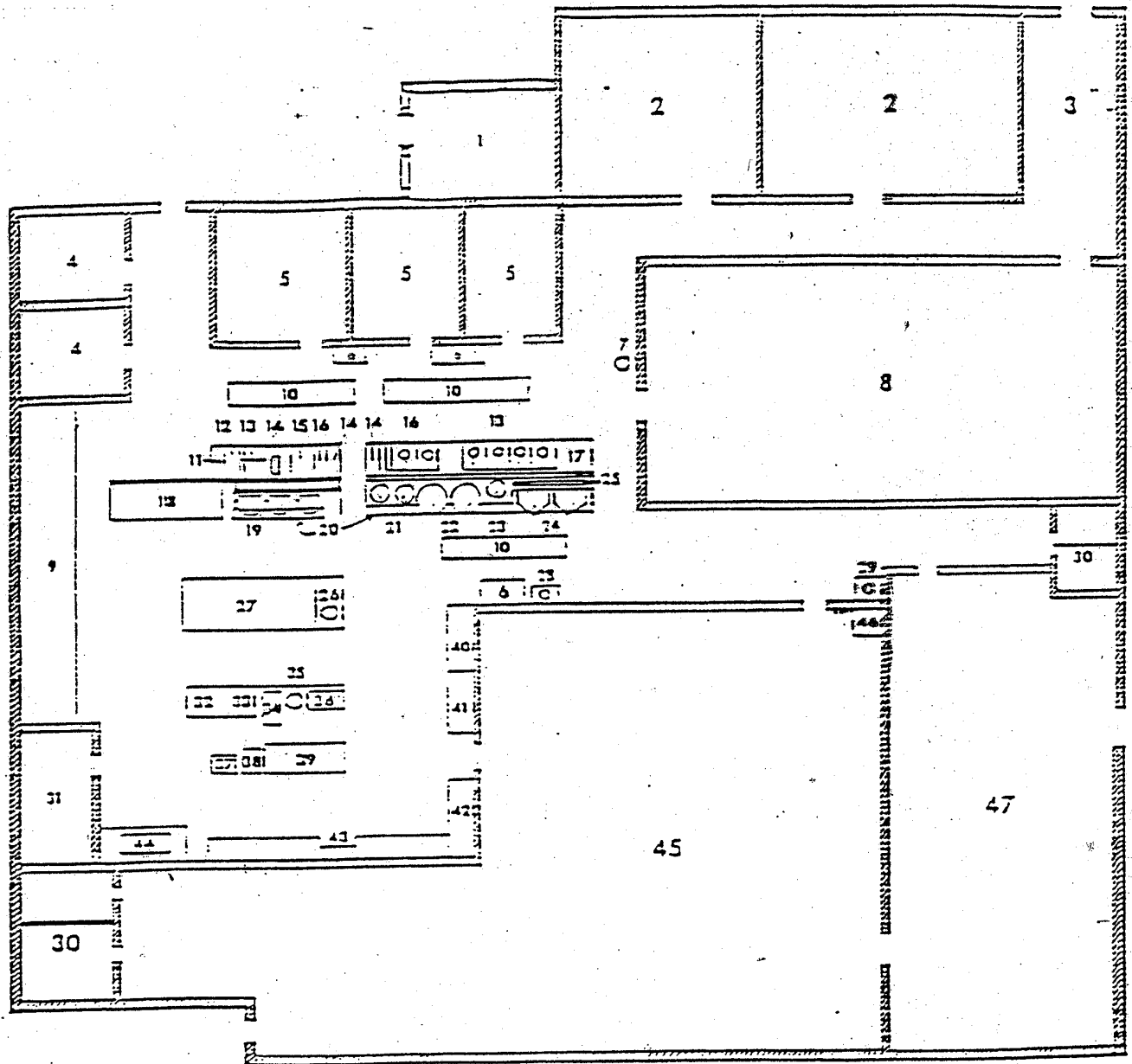
Lucas County Building Regulation  
213-2990

City of Toledo  
Building Inspection  
245-1220

Sewage disposal and water supply requirements  
(Septic Systems, Aerobic Systems, Water Wells)

Ohio Environmental Protection Agency  
Northwest District Office  
Bowling Green, Ohio 43402  
(419)352-8461

# Example Floor Plan



- |                                   |                                    |                                  |
|-----------------------------------|------------------------------------|----------------------------------|
| 1. Refuse Storage                 | 17. Char-gio Boiler                | 33. Dough Mixer-20 Qt            |
| 2. Walk-in Freezer                | 18. Roast Oven                     | 34. Dough Mixer-80 Qt            |
| 3. Receiving Area                 | 19. Vegetable Steamer              | 35. Steam Jacketed Kettle-30 Qt. |
| 4. Employee Locker and Rest Rooms | 20. Exhaust                        | 36. Hot Plates                   |
| 5. Walk-in Refrigerator           | 21. 50 Quart Steam Jacketed Kettle | 37. Cooling Rack                 |
| 6. Reach-in Refrigerator          | 22. 30 Quart Steam Jacketed Kettle | 38. Convection Oven              |
| 7. Potato Peeler                  | 23. Tilting Kettle                 | 39. Bake Ovens                   |
| 8. Dry Food Storage               | 24. Tilting Skillets               | 40. Ice Maker                    |
| 9. Clean Dish & Utensil Storage   | 25. Vegetable Sink                 | 41. Water Station                |
| 10. Prep Table                    | 26. Salad/Sandwich Prep            | 42. Scrap and Pre-rinse          |
| 11. Open Burner                   | 27. Handwashing Sink               | 43. Dish Machine                 |
| 12. Range Grill Top               | 28. Utility Sink                   | 44. Pot. and Pan Sink            |
| 13. Salamander Boiler             | 30. Public Rest Rooms              | 45. Main Dining                  |
| 14. Deep Fat Fryer                | 31. Office                         | 46. Waitress/Waiter Station      |
| 15. Broiler                       | 32. Spice Rack                     | 47. Banquet Room                 |
| 16. Spreader                      |                                    |                                  |

City of Toledo - Division of Building Inspection 419-245-1220 Fax 419-245-1329

Commercial Plan Review Information

Project Address: \_\_\_\_\_ Space/Suite # \_\_\_\_\_ Log # \_\_\_\_\_  
Estimated Project Cost: Building \_\_\_\_\_ Site Work \_\_\_\_\_ Total \_\_\_\_\_  
Type of work:  New Building  Addition  Interior Alteration  Exterior Alteration  
 Other \_\_\_\_\_

Existing Use Group: (OBBC 302.1)

A-1  A-2  A-3  A-4  A-5  B  E  F-1  F-2  H  I-1  I-2  I-3  M  
 R-1  R-2  R-3  R-4  R-5  S-1  U  N/A

New Use Group: (OBC 302.1)

A-1  A-2  A-3  A-4  A-5  B  E  F-1  F-2  H  H-1  H-2  H-3  
 H-4  I-1  I-2  I-3  I-4  M  R-1  R-2  R-3  R-4  S-1  S-2  U

Mixed Use and Occupancy: (OBC 302.3)

Non-separated  Separated  Separate Building  N/A

Is food to be served or sold in this tenant space?  Yes  No

Existing Construction Classification: (OBBC 602.1)

1-A  1-B  2-A  2-B  2-C  3-A  3-B  4  5-A  5-B  N/A

New Construction Classification: (OBC 602.1)

1-A  1-B  2-A  2-B  3-A  3-B  4  5-A  5-B  N/A

Total gross floor area: Proposed or altered \_\_\_\_\_ sq. ft. (OBC 503.1)

Existing building area: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ # of Stories \_\_\_\_\_ Height (OBC 503.1)

Area limitations:  General limitations  Unlimited area building (OBC 503.3)

Open perimeter increase  Total  Partial \_\_\_\_\_%

Existing building fire suppression system:  Total  Partial (Section of building with sprinklers)

\_\_\_\_\_  None  N/A (OBBC 903.1)

New building fire suppression system  Total  Partial  None  N/A (OBC 903.1)

Fire alarm system  Yes  No

Is building handicap accessible?  Yes  No (OBC 1101.1)

Occupant load: S.F. Method \_\_\_\_\_ Actual/Proposed \_\_\_\_\_ (OBC 1003.2.2)

# of employees \_\_\_\_\_ # of customers \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ E-mail: \_\_\_\_\_

# CITY OF TOLEDO



## DIVISION OF TAXATION AND TREASURY

April 24, 2006

To Whom It May Concern:

The City of Toledo has a municipal income tax that is applicable to all construction work performed in the city. This construction activity is covered under Section 798.01 of the Toledo Municipal Code which requires tax registration when construction work is performed. In order to become registered with the City of Toledo Division of Taxation, you must complete the questionnaire on the reverse side of this letter. This questionnaire can be returned by facsimile at telephone number (419) 936-2318. A deposit of \$250 is required at time of registration. This deposit will be applied towards your estimated net profits income tax.

The rate of Toledo municipal income tax is two and one-quarter percent (2-1/4%). As an employer, you are required to withhold municipal income tax from all compensation paid to your employees while working inside the City of Toledo. You must also pay tax on net profits attributable to Toledo projects. Completing this questionnaire will enable us to furnish the proper forms to you to effect compliance with the Toledo Income Tax Ordinance and the Construction - Tax Registration Ordinance.

If your account number is listed under another name, please call the Division of Taxation at (419) 245-1662. And we will make the necessary changes to our database.

Thank you for your consideration in this matter.

Sincerely,

Division of Taxation and Treasury

Encl. ITL

**Toledo Income Tax Questionnaire**  
City of Toledo, Division of Taxation & Treasury  
One Government Center, Suite 2070, Toledo, OH 43604-2280  
(419) 245-1662, FAX (419) 936-2318

**FAILURE TO FULLY COMPLETE MAY RESULT IN DELAYS IN ESTABLISHING YOUR ACCOUNT**

- Soc. Sec. # \_\_\_\_\_
1. Name of Owner (s) \_\_\_\_\_ Business Phone \_\_\_\_\_
2. Name of Officer (if Corporation) \_\_\_\_\_ Officer's SS# \_\_\_\_\_
3. Business Name \_\_\_\_\_
4. Employer's Federal Identification Number \_\_\_\_\_
5. Proprietor's/Corporate Officer's Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_
6. Business Address \_\_\_\_\_
7. Toledo Address \_\_\_\_\_
8. Mailing Address (if different) \_\_\_\_\_
9. Starting Date of Toledo Activities \_\_\_\_\_
10. Check off the type of Organization for Tax Purposes: Sole Proprietor (Schedule C Filer) \_\_\_\_\_;  
Corporation (Form 1120 or 1120S) \_\_\_\_\_; Partnership (Form 1065) \_\_\_\_\_ (attach listing of partners  
with names, addresses, and social security or federal identification numbers of partners); Association \_\_\_\_\_
11. Are there now or will there be employees subject to Toledo Income Tax? Yes \_\_\_\_\_ No \_\_\_\_\_
- Will you be filing monthly (withholding > \$1,000/month)? Yes \_\_\_\_\_ No \_\_\_\_\_ Payroll starting Date \_\_\_\_\_
12. Accounting Period: Calendar Year? \_\_\_\_\_ or Identify Fiscal Year Ending \_\_\_\_\_
13. Nature of Business \_\_\_\_\_
14. Is local address the home office or a branch? \_\_\_\_\_
15. If your address is not in Toledo, do you conduct business within Toledo City limits? Yes \_\_\_\_\_ No \_\_\_\_\_
16. If you operate more than one place of business, give business name and location(s):  
\_\_\_\_\_

**IF BUSINESS WAS OUTGROWTH OF ANOTHER, FILL IN BELOW**

17. Name of Old Owner (s) \_\_\_\_\_
18. Business Name \_\_\_\_\_
19. Mailing Address \_\_\_\_\_
20. Type of Organization: Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corp. \_\_\_\_\_ Association \_\_\_\_\_
21. Nature of Change: Sale \_\_\_\_\_ Discontinuance \_\_\_\_\_ Change in Ownership \_\_\_\_\_ Other \_\_\_\_\_
22. Accounting Period: Calendar Year \_\_\_\_\_ Fiscal Year Ending \_\_\_\_\_

Date \_\_\_\_\_

SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_

# CITY OF TOLEDO

## PROCEDURE FOR OBTAINING A CERTIFICATE OF OCCUPANCY

### **A NEW OR ALTERED STRUCTURE MAY NOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED**

About one week prior to expected occupancy of the structure, please call 245-1226 and inform the clerk that you are near completion of this project and your target date for occupancy. Please be prepared with your job location, all permit numbers and subcontractor names. The clerk will initiate paperwork to help expedite your occupancy.

Don't forget to schedule your final inspection at 245-1220. Before you call for your final inspection, check your approved plans and verify that all required work has been performed. After the building inspector has notified the clerk of approval, she will notify Fire Prevention to inspect the job. (NOTE: Fire Prevention does not inspect new residential structures with individual exits. Do not call Fire Prevention to schedule any fire inspection.

Stay in touch with your subcontractors and be sure that they have scheduled their inspections. Occupancy cannot be issued until approval has been granted by the Building Inspector, Electrical and Mechanical Inspectors and Fire Inspector.

If minor work remains to be completed, you may request a temporary certificate of occupancy. A temporary certificate of occupancy will not be issued if any fire and/or safety issues remain.

You have already paid for your Certificate of Occupancy. However, if for any reason you are issued a temporary occupancy, you will be required to pay an additional occupancy fee for any subsequent temporary occupancy and the final occupancy.

#### OTHER WAYS TO ENSURE THAT YOU WILL NOT EXPERIENCE DELAY IN OCCUPANCY:

- Have your building card available at the job site and verify that inspectors have signed it.
- Have your approved plans available at the job site. An inspection cannot be performed if approved plans are not on site.
- Ask that your subcontractors use the same address and to specify on their permit applications the Location of Work in multi-tenant or large structures to coincide with how you have identified the job (i.e. Judy's Jewelry-Suite 200 or 3<sup>rd</sup> floor, west wing, Toledo Hospital).

REQUEST FOR CERTIFICATE OF OCCUPANCY AND COMPLIANCE

This form must be filled out completely and returned to the Division of Inspection, One Government Center, Suite 1600, Toledo, OH 43604. To avoid any delay of occupancy, please submit it at least 7 work days prior to expected occupancy date.

YOU CANNOT OCCUPY YOUR BUILDING UNTIL A CERTIFICATE OF OCCUPANCY IS ISSUED.

All inspections must be completed and approved for all trades prior to the issuance of the certificate. Each individual trade contractor must call for his own final inspection.

Date of application \_\_\_\_\_ Date of expected occupancy \_\_\_\_\_

Building Address \_\_\_\_\_

Tenant Name and Space No. \_\_\_\_\_

Owner Name \_\_\_\_\_

Owner Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Builder Name \_\_\_\_\_

Builder Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact person in case of problems or questions:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Use of Building (church, retail, etc.) \_\_\_\_\_ Height of Bldg. (in stories) \_\_\_\_\_

Type of Construction \_\_\_\_\_ Occupancy Load (only in assembly use) \_\_\_\_\_

YOU MUST FILL IN SUBCONTRACTOR NAMES AND / OR PERMIT NUMBERS

<u>TRADE</u>	<u>PERMIT #</u>	<u>CONTRACTOR</u>
Building	_____	_____
Electrical	_____	_____
Plumbing	_____	_____
Heating	_____	_____
Air Conditioning	_____	_____
Refrigeration	_____	_____
Pressure Piping	_____	_____
Boiler	_____	_____

<u>DATE APPROVED</u>
_____
_____
_____
_____
_____
_____
_____
_____
_____
<u>FIRE</u>

NOTE: Upon receipt of this request, we contact Fire Prevention and inform them of your expected Occupancy date. They will not make a final inspection until notified to do so by us.

Date you would like final structural and fire inspections: \_\_\_\_\_  
If this is not known at this time, you must call the office to schedule the finals.