



Community Development Department

Commercial Permit Application

Permit # _____

Property	Address _____ Suite # _____	
	Business Name _____ Parcel # _____	
	Fire Department _____ County _____	
Project Information	Type of Improvement (check all that apply) <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair	
	Scope of Work (check all that apply) <input type="checkbox"/> Structural <input type="checkbox"/> Site work <input type="checkbox"/> Public Sewer Tap <input type="checkbox"/> Public Water Tap <input type="checkbox"/> Electrical <input type="checkbox"/> Heating <input type="checkbox"/> Cooling <input type="checkbox"/> Ventilation <input type="checkbox"/> Gas piping <input type="checkbox"/> Plumbing <input type="checkbox"/> Fire alarm <input type="checkbox"/> Fire suppression <input type="checkbox"/> Foundation Start Requested <input type="checkbox"/> Other _____	
	Description of Project: _____	
	Business Name _____ # of Employees _____ Business Type _____ Project Valuation _____	
Contacts	Applicant:	Contractor:
	Address:	Address:
	City, State, Zip:	City, State, Zip:
	Phone number:	Phone number:
	Email:	Email:
	Property Owner Name:	Design Professional Name:
	Address:	Architect / Engineer Registration Number:
		Address:
	Project Contact Name:	City, State, Zip:
	Company:	Phone number:
	Phone Number:	Email:
	Email:	Design Professional Signature (required):

Project Details	Construction Type	1A	1B	2A	2B	3A	3B	4	5A	5B				
	Occupancy Code	A-1	A-2	A-3	A-4	A-5	B	E	F-1	F-2	H-1	H-2	H-3	
		H-4	H-5	I-1	I-2	I-3	M	R-1	R-2	R-3	R-4	S-1	S-2	U
	Hazard Classification	Low			Moderate				High					
	Sprinkler System Required?	Yes		No		Sprinkler System Provided?					Yes	No		
	Sprinkler System Type													
	Square Footage shall be measured from outside wall to outside wall for dimensions	Total Square Footage		New					Addition / Alteration					
		Basement												
		First Floor												
		Other Floors												
Total SF														
Work Items														
Electrical			# Panels		_____									
Fire Alarm			# of Devices		_____									
Heating			# of Units		_____									
Cooling			# of Units		_____									
Kitchen Hood / Suppression			# of Hoods		_____									
Plumbing			# of Fixtures		_____									
Gas Piping			# of Valve Stops				# of Appliances		_____					
Medical Gas Piping			Yes / No		Submittal shall be made to Franklin County									
Above Ground Fuel Tanks			Yes / No		Submittal shall be made to the State of Ohio									
Boiler			Yes / No		Submittal shall be made to the State of Ohio									
Water Tap Size					¾"	1"	1½"	2"	3"	4"	6"	8"	10"	
Fire Line Tap Size					¾"	1"	1½"	2"	3"	4"	6"	8"	10"	
Water Tap Distance			# of Feet		_____									
Sewer Tap			Water tap size		¾"	1"	1½"	2"	3"	4"	6"	8"	10"	Well
Sewer Tap Distance			# of Feet		_____									
Grey Water					8"	10"	12"							
General	<ul style="list-style-type: none"> • Applications submitted with missing information or incomplete plans may not be processed for review. • A Pre-submittal meeting is required for any project that would like to utilize the phased plan review process. The commercial plan reviewer and/or chief building official shall determine eligibility for the phased plan review process. • Zoning and building reviews are done concurrently and are coordinated through the Community Development Department. 													
	Signature	<p>I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.</p>												
		Applicant Signature _____										Date _____		



Community Development Department Plan Submittal Sheet

Fire Dept. Email Date _____
Zoning Review Due _____
Building Review Due _____
Engineering Due _____
CBO Review Due _____

To be completed by the qualified individual taking responsibility for having the plans correctly submitted.

PLEASE PRINT CLEARLY

Permit / Application # _____ Date _____
Project Name / Address _____
Company Name _____
Contact Phone # _____ Fax # _____
Contact Email _____

Type of Submittal

- | | | | |
|---|---|------------------------------|-----------------------------|
| <input type="checkbox"/> Original Submittal | <input type="checkbox"/> Revision of Approved Plans | | |
| <input type="checkbox"/> Response to Plan Review Letter | Change to Square Footage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> Additional Information for Permits in Review | Change to Site Plan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Exterior Equipment moved? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Change to Landscaping? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Change to Exterior Elevation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Fee Schedule

Fees Due at time of submittal for Residential Plan Review	Building revision	50.50
	Zoning revision	15.00

Commercial fees are charged per hour and will be due at the time of pick up

Plans Letter Plan Sheet and response letters provided

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Cover letter / Scope of changes (required) |
| <input type="checkbox"/> | | Title Sheet / Index (required) |
| <input type="checkbox"/> | <input type="checkbox"/> | Site Plan |
| <input type="checkbox"/> | <input type="checkbox"/> | Architectural |
| <input type="checkbox"/> | <input type="checkbox"/> | Civil |
| <input type="checkbox"/> | <input type="checkbox"/> | Planning |
| <input type="checkbox"/> | <input type="checkbox"/> | Structural / Floor Plan |
| <input type="checkbox"/> | <input type="checkbox"/> | Fire Resistance |
| <input type="checkbox"/> | <input type="checkbox"/> | Electrical |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical |
| <input type="checkbox"/> | <input type="checkbox"/> | Plumbing |
| <input type="checkbox"/> | <input type="checkbox"/> | Fire Alarm |
| <input type="checkbox"/> | <input type="checkbox"/> | Fire Suppression |
| <input type="checkbox"/> | <input type="checkbox"/> | Life Safety |
| <input type="checkbox"/> | <input type="checkbox"/> | Accessibility |
| <input type="checkbox"/> | <input type="checkbox"/> | Energy Code Compliance |
| <input type="checkbox"/> | <input type="checkbox"/> | Special Inspections (as required by OBC) |
| <input type="checkbox"/> | <input type="checkbox"/> | Other |

Name of contact person (print) _____
Signature _____



Commercial Plan Submittal Informational Sheet

Commercial projects shall have the application form and commercial plan tracking sheet completed and submitted with 4 copies of the plans and other information. Plans shall be submitted per the current building code. This list is informational and is not all inclusive.

General Plan Requirements	
	Plans must be 36" x 48"
	Legible
Title Sheet / Index	
	Address
	Construction Type
	Occupancy Classification
	Gross Square Footage for each level
	Occupant Load Design
	Adequate information to determine design structural load
	Designers company and person responsible for design
Site Plan	
	North arrow
	Scaled drawing of existing and proposed structure and appurtenances
	Property lines / dimensions
	Street orientation / Grade at street
	Fences existing and proposed
	Elevations of all proposed finish grades
	Utility / Drainage easements / locations
	Flood Zones if applicable
	Site accessibility plan for 4 or more units
Architectural	
	Elevations for all 4 sides of structure
	Architectural materials list
Civil	
	Overall Site Plan
	Grade Elevations
	Water, Sewer, Storm Water and Site Retention Areas
	Utilities
	Silt Protection
	Access / Curb cuts, driveways, sidewalk, etc.
Planning (include in the plan set and include an additional 11x17 copy)	
	Landscape plan
	Photometric plan
	Specifications for light poles
	Exterior Material list and samples

Structural	
	Floor plans with all room designations and dimensions including door swings, stairs, windows and area description
	Describe and show the differing walls types by cross hatching, notations or other clearly understandable method
	Cross sections, wall sections, details, typical connections and construction materials
	Complete structural description including all of the structural elements and data that is required due to occupancy type
	Engineered floor layouts and individual calculation sheets
	Information on beams and carrying members, wood or steel
Fire Resistance	
	Fire resistance rating of all applicable structural elements including walls, doors, penetrations, shaft wall
Electrical, Mechanical, Plumbing	
	System Descriptions
	Equipment manufactures specifications
	Fixtures / Device schedules
Fire Alarm / Fire Suppression	
	Installer's name, number
	System Descriptions
	Fixtures / Device schedule
Life Safety	
	Identify Travel distance from all floors & areas
	Egress & Exit Paths
Accessibility	
	Compliance shall be demonstrated and details provided for site and facility
Energy Code Compliance	
	Compliance shall be demonstrated in accordance with IECC or ASHRAE 90.1
Special Inspections (as required by OBC)	
Operations	
	Information shall be provided describing the Business Operations, Products and materials produced, used dispensed or stored in the facility.
	MSDS Sheets for hazardous materials, arrangement of storage racks and control areas.



Community Development Department

Commercial Fee Schedule

			Fee
Commercial New Building			
Structure	Base fee	250.00	_____
	Inspection fee	.05 / sf	_____ sf
	Occupancy fee	75.00	_____
	State 3% fee	.03 of above fees	_____
	Zoning fee	30.00	_____
	Certificate of Appropriateness	250.00	_____
Electric	Base fee	100.00	_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	_____ sf
	Temporary Electric	100.00	_____
	State 3% fee	.03 of above fees	_____
Low Voltage	Base fee (50 volts or more)	150.00	_____
	State 3% fee	.03 of above fee	_____
Mechanical	Base fee	100.00	_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Gas Piping	Base fee	50.00	_____
	Inspection fee	15.00 / valve stop	_____ valves
	State 3% fee	.03 of above fees	_____
Plumbing	Base fee + 1 st fixture	200.00	_____
	Inspection fee	20.00 / fixture	_____ fixtures
	State 3%	.03 of above fees	_____
Fire Protection	Base fee	50.00	_____
	Inspection fee	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Fire Alarm	Base fee	50.00	_____
	Inspection fee (maximum fee \$500)	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Kitchen Hood	Base fee	100.00 / each	_____ /units
	State 3% fee	.03 of above fees	_____
Greywater System	8" tap fee	74,604.80	_____
	10" tap fee	107,244.80	_____
	12" tap fee	200,500.80	_____
Plan Review Fees		83.00/hour	Due at time of pickup

***See separate page for Water/Sewer fees**



Community Development Department

Commercial Fee Schedule

Commercial Addition or Accessory Structure

Structure	Addition Base fee	250.00		_____
	Addition Inspection fee	.05 / sf		_____
	Accessory Structure Base fee	200.00		_____
	State 3% fee	.03 of above fees		_____
	Zoning fee	30.00		_____
	Certificate of Appropriateness	250.00		_____
Electric	Base fee	100.00		_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	sf	_____
	Temporary Electric	100.00 / each		_____
	State 3% fee	.03 of above fees		_____
Low Voltage	Base fee (50 volts or more)	150.00		_____
	State 3% fee	.03 of above fee		_____
Mechanical	Base fee	100.00		_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	sf	_____
	State 3% fee	.03 of above fees		_____
Gas Piping	Base fee	50.00		_____
	Inspection fee	15.00 / valve stop	valves	_____
	State 3% fee	.03 of above fees		_____
Plumbing	Base fee + 1 st fixture	200.00		_____
	Inspection fee	20.00 / fixture	fixtures	_____
	State 3%	.03 of above fees		_____
Fire Protection	Base fee	50.00		_____
	Inspection fee	.03 / sf	sf	_____
	State 3% fee	.03 of above fees		_____
Fire Alarm	Base fee	50.00		_____
	Inspection fee (maximum fee \$500)	.03 / sf	sf	_____
	State 3% fee	.03 of above fees		_____
Kitchen Hood	Base fee	100.00 / each	/units	_____
	State 3% fee	.03 of above fees		_____

Plan Review Fees **83.00/hour** **Due at time of pickup**



Community Development Department

Commercial Fee Schedule

Commercial Alterations and/or Restorations

Structure	Base fee	200.00	
	Inspection fee	.05 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
	Certificate of Appropriateness (minor change per C.O. section 1157.07)	50.00	_____
	Certificate of Appropriateness (major change per C.O. section 1157.07)	250.00	_____
Electric	Base fee	100.00	_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Low Voltage	Base fee (50 volts or more)	150.00	_____
	State 3% fee	.03 of above fee	_____
Mechanical	Base fee	100.00	_____
	Inspection fee (maximum fee \$4,000)	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Gas Piping	Base fee	50.00	_____
	Inspection fee	15.00 / valve stop	_____ valves
	State 3% fee	.03 of above fees	_____
Plumbing	Base fee + 1 st fixture	200.00	_____
	Inspection fee	20.00 / fixture	_____ fixtures
	State 3%	.03 of above fees	_____
Fire Protection	Base fee	50.00	_____
	Inspection fee	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Fire Alarm	Base fee	50.00	_____
	Inspection fee (maximum fee \$500)	.03 / sf	_____ sf
	State 3% fee	.03 of above fees	_____
Kitchen Hood	Base fee	100.00 / each	_____ /units
	State 3% fee	.03 of above fees	_____
Plan Review Fees		83.00/hour	Due at time of pickup



Community Development Department

Commercial Fee Schedule

Commercial Small Projects and Individual permits

Structure	Cell Towers, Antenna tower & related structures	250.00		_____
	Satellite Dish	125.00		_____
	Commercial Swimming Pool	250.00		_____
	Dumpster Enclosure (requiring footings)	30.00		_____
	Walls, arbors, gazebos or similar structures	50.00		_____
	Change of Use	250.00		_____
	Change of Occupant	75.00		_____
	State 3%	.03 of above fees		_____
	Zoning fee for above projects	30.00		_____
	Zoning	Zoning	30.00	
Certificate of Appropriateness (minor)		50.00		_____
Certificate of Appropriateness (major)		250.00		_____
Electric	Base fee	50.00		_____
	Inspection fee – subpanel, etc.	7.00 / unit	units	_____
	Hot Water Heater	10.00 /unit	units	_____
	Heating Unit	25.00 / unit	units	_____
	Annual Approval	250.00		_____
	Temporary Electric	100.00		_____
	State 3% fee	.03 of above fees		_____
	Low Voltage	Base fee (50 volts or more)	150.00	
	State 3% fee	.03 of above fee		_____
Mechanical	Heating, Cooling, Air Handling, Refrigeration	75.00 / unit	units	_____
	State 3% fee	.03 of above fees		_____
Gas Piping	Base fee	50.00		_____
	Inspection fee	15.00 / valve	valves	_____
	State 3% fee	.03 of above fees		_____
Plumbing	Base fee + 1 st fixture	200.00		_____
	Inspection fee	20.00 / fixture	fixtures	_____
	State 3%	.03 of above fees		_____
Fire Protection	Base fee	50.00		_____
	Inspection fee	.03 / sf	sf	_____
	State 3% fee	.03 of above fees		_____
Kitchen Hood	Base fee	100.00 / each	/units	_____
	State 3% fee	.03 of above fees		_____

Plan Review Fees

83.00/hour

Due at time of pickup

***If a project is not listed please call for information**

99 West Main Street • P.O. Box 188 • New Albany, Ohio 43054 • Phone 614.939.2254 • Fax 614.939.2234