



Community Development Commercial Permit Application

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------|-----------------------|-----|-----|-----|-----|-----|-----|----|----|------------------------|-----|-----|-----|-----|-----|---|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|-----|-----|-----|-----|-----|-----|-----|---|--|---------------------------|-----|-----|-----|-----|-----|---|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|-----|-----|-----|-----|-----|-----|-----|---|--|--|----------------------|-----|-----------------------|----------|--|--|-------------|--|--|--------------|--|--|----------|--|--|
| General | <p>Important Notes</p> <ul style="list-style-type: none"> Engineering plans must be approved prior to submitting for a building permit. Applications submitted with missing information or incomplete plans will not be reviewed. 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Property | <p>Address _____ Suite # _____</p> <p>Business Name _____ Parcel # _____</p> <p>Fire Department _____ County _____</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Project Information | <p>Type of Improvement (check all that apply)</p> <p><input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair</p> <p>Scope of Work (check all that apply)</p> <p><input type="checkbox"/> Structural <input type="checkbox"/> Site work <input type="checkbox"/> Public Sewer Tap <input type="checkbox"/> Public Water Tap</p> <p><input type="checkbox"/> Electrical <input type="checkbox"/> Heating <input type="checkbox"/> Cooling <input type="checkbox"/> Ventilation</p> <p><input type="checkbox"/> Gas piping <input type="checkbox"/> Plumbing <input type="checkbox"/> Fire alarm <input type="checkbox"/> Fire suppression</p> <p><input type="checkbox"/> Foundation Start Requested <input type="checkbox"/> Other _____</p> <p>Description of Project: _____</p> <p>_____</p> <p>Business Name _____ # of Employees _____</p> <p>Business Type _____ Project Valuation _____</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Construction Type</td> <td>1A</td> <td>1B</td> <td>2A</td> <td>2B</td> <td>3A</td> <td>3B</td> <td>4</td> <td>5A</td> <td>5B</td> </tr> <tr> <td rowspan="3">Primary Occupancy Code</td> <td>A-1</td> <td>A-2</td> <td>A-3</td> <td>A-4</td> <td>A-5</td> <td>B</td> <td>E</td> <td>F-1</td> <td>F-2</td> </tr> <tr> <td>H-1</td> <td>H-2</td> <td>H-3</td> <td>H-4</td> <td>H-5</td> <td>I-1</td> <td>I-2</td> <td>I-3</td> <td>M</td> </tr> <tr> <td>R-1</td> <td>R-2</td> <td>R-3</td> <td>R-4</td> <td>R-5</td> <td>S-1</td> <td>S-2</td> <td>U</td> <td></td> </tr> <tr> <td rowspan="3">Accessory Occupancy Codes</td> <td>A-1</td> <td>A-2</td> <td>A-3</td> <td>A-4</td> <td>A-5</td> <td>B</td> <td>E</td> <td>F-1</td> <td>F-2</td> </tr> <tr> <td>H-1</td> <td>H-2</td> <td>H-3</td> <td>H-4</td> <td>H-5</td> <td>I-1</td> <td>I-2</td> <td>I-3</td> <td>M</td> </tr> <tr> <td>R-1</td> <td>R-2</td> <td>R-3</td> <td>R-4</td> <td>R-5</td> <td>S-1</td> <td>S-2</td> <td>U</td> <td></td> </tr> </table> <p>Hazard Classification Low Moderate High</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="5" style="text-align:center;">Square Footage shall be measured from outside wall to outside wall for dimensions</td> <td>Total Square Footage</td> <td>New</td> <td>Addition / Alteration</td> </tr> <tr> <td>Basement</td> <td></td> <td></td> </tr> <tr> <td>First Floor</td> <td></td> <td></td> </tr> <tr> <td>Other Floors</td> <td></td> <td></td> </tr> <tr> <td align="center">Total SF</td> <td></td> <td></td> </tr> </table> | Construction Type | 1A | 1B | 2A | 2B | 3A | 3B | 4 | 5A | 5B | Primary 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 | R-5 | S-1 | S-2 | U | | Accessory Occupancy Codes | 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 | R-5 | S-1 | S-2 | U | | 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 | | |
| Construction Type | 1A | 1B | 2A | 2B | 3A | 3B | 4 | 5A | 5B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Primary 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 | R-5 | S-1 | S-2 | U | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Accessory Occupancy Codes | 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 | R-5 | S-1 | S-2 | U | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Department Address: 7815 Walton Parkway • New Albany, Ohio 43054 • Phone 614.939.2254

Mailing Address: 99 West Main Street • P.O. Box 188 • New Albany, Ohio 43054

| | | | | |
|----------------------------|---|-----------------------------------|--|-------|
| Contacts | Applicant: | | Contractor: | |
| | Address: | | Address: | |
| | City, State, Zip: | | City, State, Zip: | |
| | Phone number: | | Phone number: | |
| | Email: | | Email: | |
| | Property Owner Name: | | Business Owner Emergency Contact | |
| | Address: | | Company Name: | |
| | City, State, Zip: | | Emergency Contact Name: | |
| | Project Contact Name: | | Phone Number: | |
| | Company: | | Email: | |
| | Phone Number: | | Other Contact Information: | |
| | Email: | | | |
| | Project Details | 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" | | |
| Signature | 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. | | | |
| | Applicant Signature _____ | | Date _____ | |

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Community Development Commercial Fees Schedule

| Commercial New Building | | | Fee |
|--------------------------------|--------------------------------------|--------------------|------------------------------|
| 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 | | 130.00/hour | Due at time of pickup |

*Call engineering staff for Water/Sewer fees

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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 | | 130.00/hour | Due at time of pickup |

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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 | | 130.00/hour | Due at time of pickup |

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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 | | 130.00/hour | Due at time of pickup |

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

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