

APPLICATION FOR BUILDING PERMIT

PARCEL NUMBER _____

COUNTY _____

(SUBMIT ONE APPLICATION FOR EACH BUILDING OR STRUCTURE)
PLEASE PRINT OR TYPE ON BOTH SIDES

● Property Owner's Name _____

Name of Firm (Owner) _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone No. _____

● Street Address of Project _____

Specify EXACT location of project, Landmarks, etc. _____

City, Town _____ State _____ Zip Code _____

● Plans Prepared By (check one)	Ohio Registration No.
A. Ohio Registered Architect <input type="checkbox"/>	_____
B. Ohio Professional Engineer <input type="checkbox"/>	_____
C. Ohio Sprinkler System <input type="checkbox"/>	_____

● Name Contractor _____

Street Address _____

City _____ State _____ Zip _____

Telephone Number _____

● A. Description of work and type of building—Store, Church, etc. _____

B. Is this in incorporated City or Village? YES NO

C. Nature of Job
Change of use New Addition Alteration Article 25

● Type of Construction

<input type="checkbox"/> 1A	<input type="checkbox"/> 1B	<input type="checkbox"/> 2A	<input type="checkbox"/> 2B	<input type="checkbox"/> 2C	<input type="checkbox"/> 3A
<input type="checkbox"/> 3B	<input type="checkbox"/> 4	<input type="checkbox"/> 5A	<input type="checkbox"/> 5B		

● A. Current OBBC Use Group _____

B. Proposed OBBC Use Group

<input type="checkbox"/> A1	<input type="checkbox"/> A2	<input type="checkbox"/> A3	<input type="checkbox"/> A4	<input type="checkbox"/> A5	<input type="checkbox"/> B	<input type="checkbox"/> E	<input type="checkbox"/> F1
<input type="checkbox"/> F2	<input type="checkbox"/> H1	<input type="checkbox"/> H2	<input type="checkbox"/> H3	<input type="checkbox"/> H4	<input type="checkbox"/> I1	<input type="checkbox"/> I2	<input type="checkbox"/> I3
<input type="checkbox"/> M	<input type="checkbox"/> R1	<input type="checkbox"/> R2	<input type="checkbox"/> R3	<input type="checkbox"/> S1	<input type="checkbox"/> S2	<input type="checkbox"/> U	

C. If building us Use Group R1, R2, or R3, specify the number of apartments or units. _____

● Cost of work covered by this application \$ _____

Signature of Applicant _____

Title _____ Date _____

Date Received _____

Other permits may be required in the City of Belpre, City of Marietta, Village of Beverly, Village of New Matamoras & Village of Caldwell. Ohio plumbing permits can be obtained from the Ohio Department of Commerce - Plumbing Division 614-644-2622.

* Fees are in addition to the initial fee.
** Prior to submission of application and plans.

Make check payable to: Washington County Building Dept.

APPLICATION NO. _____

CHECK HERE IF INSTALLING SIGN(S) _____ HOW MANY _____

● Submitter's Name _____

Name of Firm _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone Number _____ FAX Number _____

● Check Appropriate Floor(s) _____ Total Square Feet per Floor _____

- A. Basement _____
- B. First Floor _____
- C. 2, 3, 4, 5, 6, (Circle No.) _____
- D. Additional Floors—Mezzanines _____
- E. Total Square Ft. _____

ROUND SQUARE FOOTAGE UP TO NEAREST HUNDRED

F E E S C H E D U L E	● STRUCTURAL AND MECHANICAL			
	\$160.00 Processing Fee			
	\$ 7.50 Per 100 Square Feet			
	● RE-ROOFING ONLY			
	\$160.00 Processing Fee			
	\$ 2.00 Per 100 Sq. Ft. Up to 5,000 Sq. Ft.			
	\$ 1.00 Per 100 Sq. Ft. 5,001 to 50,000 Sq. Ft. *			
	\$.35 Per 100 Sq. Ft Above 50,000 Sq. Ft. *			
	● ELECTRICAL			
	\$160.00 Processing Fee			
\$ 3.00 Per 100 Square Feet				
● FIRE SUPPRESSION				
\$160.00 Processing Fee				
\$ 5.00 Per 100 Sq. Ft. up to 70,000 Sq. Ft. *				
\$ 1.00 Per 100 Sq. Ft. above 70,000 Sq. Ft. *				
● FIRE DETECTION & ALARMS				
\$160.00 Processing Fee				
\$ 1.00 Per 100 Square Feet				
● INDUSTRIALIZED UNIT				
\$160.00 Processing Fee				
\$ 2.60 Per 100 Square Feet				
● FIELD INSPECTION				
\$100.00 Structural				
\$100.00 Electrical				
● RESUBMITTAL FEES				
\$ 60.00 Per Hour				
● MISCELLANEOUS FEES				
\$ 60.00 Per Hour—Preliminary Review **				
\$ 30.00 Per permit—outside Washington Co.				
\$150.00 Partial Permit				
● INCIDENTAL FEES				
\$ 25.00 per item				
● NON-COMPLIANCE FEES				
1 st offense 150%, 2 nd offense 175%, 3 rd offense 200%				
● Sub Total	⇒	\$		
● Add: State of Ohio Surcharge—3%				
● Total	⇒	\$		

WASHINGTON COUNTY BUILDING DEPARTMENT
217 Putnam Street
Marietta, OH 45750
(740) 374-4185—Office (740) 374-3096—FAX

Is project located in a FEMA flood prone area? If the answer is YES, supply the additional information at right.	YES <input type="checkbox"/> NO <input type="checkbox"/> Base Flood Elevation _____ Zone A <input type="checkbox"/> Zone V <input type="checkbox"/>
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READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THE REVERSE SIDE

1. All drawings, including plot plans, elevations, floor plans, and plans for elevator enclosures, must be in TRIPPLICATE, complete with wall sections showing footer, foundation, floor, wall and roof construction, indicating all structural members, size, spacing, material, etc. Two copies of the specifications for the work must be submitted, or the specifications may appear on the plans. The seal of an Ohio registered architect or engineer shall be plainly visible in the lower right hand corner on *all* plans or drawings.
2. **ALL PLANS SUBMITTED SHALL PROVIDE SUFFICIENT INFORMATION AND DETAIL TO DETERMINE FULL COMPLIANCE WITH THE REQUIREMENTS OF THE OHIO BASIC BUILDING CODE (OBBC).**
3. Our approval does not include the water supply, plumbing, drainage, and sewage disposal. Plans and specifications for this work shall be submitted for approval, before construction is started, the City of Marietta Health Department or the Division of Industrial Compliance, Plumbing Unit, Columbus, Ohio, (614) 644-2622, whichever is applicable.
4. **COMPLETE THE REVERSE SIDE OF THIS FORM FOR EACH BUILDING OR STRUCTURE. IF THE PROJECT IS AN ADDITION, ALTERATION, OR ARTICLE 25, PROVIDE THE SUPPLEMENTARY INFORMATION REQUESTED BELOW FOR THE EXISTING BUILDING.**

A. Area—Square Feet	B. Walls	<input type="checkbox"/> Masonry	<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Metal	<input type="checkbox"/> Other (Specify)
Basement _____				Reinforced	Heavy
1 st Floor _____	C. Roof	<input type="checkbox"/> Wood Frame	<input type="checkbox"/> All Metal	<input type="checkbox"/> Concrete	<input type="checkbox"/> Timber <input type="checkbox"/> Other
2 nd Floor _____		Wood on	Concrete on	Reinforced	
3 rd Floor _____	D. Floors	<input type="checkbox"/> Wood Joists	<input type="checkbox"/> Steel Joists	<input type="checkbox"/> Concrete	<input type="checkbox"/> Slab on Grade <input type="checkbox"/> Other
Other Floors _____		Exposed Joists	Plaster on	Fire Rated Dry	
	E. Ceilings	<input type="checkbox"/> Steel <input type="checkbox"/> Wood	<input type="checkbox"/> Lath	<input type="checkbox"/> Wall or Tile	Rating in Hours <input type="checkbox"/> _____
F. Show any fire walls, their thickness and openings.					
G. Does addition block exits from present building? If so, how?					
H. Comments and other Explanations:					

IMPORTANT NOTICES

A SEPARATE APPLICATION FOR CERTIFICATE OF PLAN APPROVAL SHALL BE SUBMITTED FOR EACH BUILDING OR STRUCTURE.

SECTIONS 303.02 TO 519.25 R.C. INCLUSIVE These Sections of the Revised Code provide for municipal, township, and county zoning. Many municipalities, townships, and counties have availed themselves of these provisions. Therefore, it is suggested that you contact the appropriate municipal, township, or county zoning before construction is begun.

SECTION 3791.04 R.C. (EXTRACTED AND PARAPHRASED) It is unlawful to enter into contract for or begin the construction of a new building/structure, the alteration of or addition to an existing building/structure, and/or changing the occupancy of an existing building/structure before receiving approved plans for the municipal or county certified building department. If there is no municipal or county certified building department, approved plans must be obtained from the Division of Industrial Compliance. Construction of the building/structure must be in accordance with the approved plans, and with the other provisions stated in Chapters 3781 and 3791 Revised Code.

(Over)