

APPLICATION FOR CERTIFICATE OF PLAN APPROVAL

THREE (3) SETS OF CONSTRUCTION DOCUMENTS REQUIRED.
SUBMIT ONE APPLICATION FOR EACH BUILDING OR STRUCTURE

PLEASE PRINT OR TYPE

1. Owner's Name

Name of Firm

Street Address

City Zip Code

Telephone No.

Email

2. Plans Prepared By Ohio Registration No.

A. Ohio Registered Architect

B. Ohio Professional Engineer

C. Ohio Sprinkler System Designer

D. Other

3. A. Exact Address of Project

B. Nature of Job

Change of Use New Addition Alteration Article 32

4. Type of Construction

1A 2A 3A 4A 5A

1B 2B 3B 5B

To Calculate Floor Area:

A. Measure to outside walls for dimensions

B. Include supported canopies as measured from the center-lines of the furthest columns or supports

5. A. Proposed OBC Use Group

A1 A2 A3 A4 A5 B E F1 F2 H

11 12 13 M R1 R2 R3 S1 S2 U

6. Submitter's Name

Name of Firm

Street Address

City Zip Code

Telephone No.

Email

7. Contractor's Name

Email

8. Cost of work covered by this application

\$

9. Signature of Applicant Date

10. Name of Person Drawing Plans

Street Address

City Zip Code

Telephone No.

Email

Check Appropriate Floor(s) Total Square Feet per Floor

A. Basement

B. First Floor

C. Mezzanine(s)

D. 2, 3, 4, 5, 6, (Circle No.)

F. Total Square Ft. = A+ B+ C+ D

11. STRUCTURAL FEES

A. \$250.00 Processing Fee

B. \$9.50 Per 100 Sq. Ft. Fee

C. \$9.50 per Lineal Ft (Ex. Fences)

D. \$150.00 Special Inspection

ELECTRICAL FEES

A. \$250.00 Processing Fee

B. \$5.75 Per 100 Sq. Ft. Fee

C. \$5.75 Per Alarm Device

D. \$150.00 Special Inspection

MECHANICAL FEES

A. \$250.00 Processing Fee

B. \$5.75 Per 100 Sq. Ft.

C. \$5.75 Per Lineal Ft. (Ex. Fences)

D. \$150.00 Special Inspection

SPRINKLER FEES

A. \$250.00 Processing Fee

B. \$5.75 Per 100 Sq. Ft. Fee

C. \$150.00 Special Inspection

INDUSTRIALIZED UNIT FEES

A. \$200.00 Processing Fee

B. \$1.75 Per 100 Sq. Ft. Fee

C. \$150.00 Special Inspection Fee

12. ADD PLUMBING FEE TOTAL

13. Sub Total

14. State Of Ohio (Add 3%)

15. Sub Total

16. Technology Fee \$ 3.75

17. Make Checks Payable To
 The City of Chillicothe **TOTAL**

(740) 773-8980

Chillicothe Building Department • 35 S. Paint St. • Chillicothe, Ohio 45601

Commercial Permits Only

NAME OF JOB: _____ OWNERS NAME: _____

JOB ADDRESS _____

BUILDING TYPE: NEW EXISTING (CIRCLE ONE)

BUILDING USE: _____

NAME OF REGISTERED PLUMBER: _____

PLEASE READ THIS INFORMATION:

Permits left dormant for more than one year are subject to review and revocation.
A re-inspection fee of \$103.00 will be assessed whenever a re-inspection is necessary.
Isometric drawings should be submitted with this application and approved before a permit is issued.
No portion of any building should be occupied until final air tests and inspections have been made and approved.

The undersigned hereby applies for a permit to do plumbing conforming to and for the inspection thereof as provided in Section 3703-99, inclusive of the Revised Code and the Ohio Administrative Code 4101:2-51.

APPLICANT'S NAME: _____ PHONE: _____

APPLICANT'S ADDRESS: _____

APPLICANTS SIGNATURE: _____

Special Permit - 1-2 fixtures ONLY\$158.25

OR Permits requiring three (3) or more fixtures must complete worksheet C.

Plumbing processing fee: \$200.00A \$200.00

Plan evaluation fee: \$200.00B \$200.00

Total fixture count from worksheet C _____ X \$20.00C _____

Total Plumbing Fees by Totalling Entries A+B+C..... _____

Add Total Fee To Line "12" On Certificate Of Plan Approval Application

PLUMBING CONTRACTOR SHALL BE STATE LICENSED AND REGISTERED WITH THE CITY OF CHILLICOTHE

WORKSHEET C
 PLUMBING FEE SCHEDULE

Fixture	Count	Fixture	Count	Fixture	Count
Air Admittance		Ice Makers		Sinks, Plaster	
Aspirators		Interceptors, Garage/Oil		Sinks, Scullery	
Autopsy Tables, Morgue		Interceptors, Grease		Sinks, Food Prep	
Backflow Devices		Interceptors, Sand		Sinks, Mop	
Bidets		Lavatories		Sinks, Surgical	
Dental Cuspidors		Piping Systems, Sanitary		Sinks, X-Ray	
Dental Lavatories, Chair		Piping Systems, Storm		Sterilizers	
Dilution Sumps		Piping Systems, Water		Sump-Pumps	
Drains, Floor		Sewage/Ejectors		Tubs, Bath	
Drains, Roof Storm		Shampoo Bowls		Tubs, Laundry	
Expansion Tanks		Showers		Urinals	
Fountains, Baptismal		Sinks, Bar		Valves, Pressure Reducer	
Fountains, Drinking		Sinks, Chemical		Valves, Tempering	
Fountains, Soda		Sinks, Clinical		Washers, Automatic	
Fountains, Wash		Sinks, Domestic		Washers, Bed Pan	
Garbage Disposals		Sinks, Floor		Washers, Dish	
Hose Bibbs, Outside		Sinks, Instrument		Washers, Eye (Emergency)	
Hot Water Dispensers		Sinks, Laboratory		Water Closets	
Hydrotherapy Baths		Sinks, Pharmacy		Water Heaters	
				TOTAL FIXTURE COUNT	