



## APPLICATION FOR RESIDENTIAL BUILDING PERMIT PLAN REVIEW

Date of Submission:

**READ THE FOLLOWING INSTRUCTIONS AND INFORMATION BEFORE COMPLETING THIS**

1. All submittals must include TWO (2) complete sets of drawings including plot plan and a complete description of all work to be performed.
2. All plans submitted shall bear sufficient information to determine compliance with the Residential Code of Ohio. Drawings shall also indicate clearly the principle use of the building or structure. The floor area for such uses shall be clearly shown on plans.
3. Drawings must include elevations, floor plans, elevator enclosures, complete wall sections showing footer, foundation, floor, walls and roof construction indicating all structural members, size, spacing, material, etc.
4. The proposed work must be done in accordance with approved plans, specifications, codes and standards. **Separate permits which may be required for the proposed project include: electrical, HVAC, plumbing, sewer, concrete, etc., and can be paid by general contractor at the time of initial building permit issued. HOWEVER, all subcontractors must be registered the same as the general contractor, including bond, insurance and \$100.00 fee.**
5. It is the duty of the General Contractor/Homeowner to insure that all required inspections are scheduled and all work installed has been approved by the City prior to proceeding to the next phase of construction. Electrical permits are obtained at the Lake County Building Department and inspection by same. Electrical contractors must be registered, bonded and insured in the City of Wickliffe prior to starting any work. Fee is same as general contractor, \$100.00. The General Contractor/Homeowner is responsible to obtain a FINAL inspection at the completion of the project.
6. The permit becomes null and void if work or construction authorized is not commenced within twelve (12) months, or if construction work is suspended or abandoned for a period of 180 consecutive days at any time after work is commenced.
7. I hereby certify that I have read and examined this application and that all information is true, accurate and complete. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I authorize the City of Wickliffe Building Department to enter this property for the purpose of site inspections for the duration of this project.
8. FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE, SECTION 2921.13(A)(5), A MISDEMEANOR OF THE FIRST DEGREE AND PUNISHABLE BY UP TO SIX (6) MONTHS AND A FINE OF \$1000.00 OR BOTH.

**HOMEOWNER:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Tel#: \_\_\_\_\_ Fax: \_\_\_\_\_

**GENERAL CONTRACTOR:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Tel#: \_\_\_\_\_ Fax: \_\_\_\_\_



# The City of Wickliffe

Mayor & Safety Director  
John A. Barbish

Council President  
Edward A. Levon

Council at Large  
Matthew C. Jaworski  
Maria L. Salotto

Ward 1  
Thomas M. Bogo, Sr.

Ward 2  
Jason M. Biondolillo

Ward 3  
Joseph D. Sakacs

Ward 4  
Sherry Koski

Director of Law  
Colt J. Zele  
(440) 943-7104

Director of Public Service  
Joseph J. D'Ambrosio  
(440) 943-7125

Director of Finance  
Debra S. Doles  
(440) 943-7117

Building Commissioner  
Raymond F. Sack  
(440) 943-7115

Chief of Police  
Andy E. Ice  
(440) 943-1234

Chief of Fire  
James G. Powers  
(440) 943-7140

City Engineer  
Peter J. Formica  
(440) 530-2210

Director of Recreation  
Community Center  
Anthony E. Stopp  
(440) 943-7120

Economic Development  
Manager  
Nicola Drake  
(937) 345-0242

## CERTIFICATE OF PLAN APPROVAL

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Construction documents submitted with application for plan approval were reviewed for compliance with applicable provisions of the 2019 Residential Code of Ohio and referenced Standards. Plans have been determined to be in compliance with applicable code regulations are approved.

### ***The project consist of:***

The following items are intended to provide the applicant with useful information regarding the approved project.

1. All electrical permits shall be obtained at Lake County Building Department along with inspection approval. Contractor must be registered/bonded/insured and pay fee for registration at Wickliffe Building Department.
2. Plumbing/sewer and any or all other required permits and inspections shall be obtained at Wickliffe Building Department.
3. **RCO 108.2** At the time that the certificate of plan approval is issued, the residential building official shall provide to the owner or owner's rep. a list of all required inspections for each project. The required inspection list shall be created from the applicable inspections set forth in sections 108.2.1 to 108.211. The residential building official, upon notification from the owner of the owner's agent that the work is ready for inspection, shall cause the inspections set forth in the required inspection list to be made by an appropriate certified residential inspector in accordance with the approved residential construction documents. (see attached list for required inspections).
4. **R.C.O. 308.4** Provide safety glazing in hazardous locations indicated in this

Permit No. \_\_\_\_\_  
Plan No. \_\_\_\_\_

C.D. \_\_\_\_\_  
T.L.D. \_\_\_\_\_  
GARAGE \_\_\_\_\_  
DEMO \_\_\_\_\_  
GRADE SET \_\_\_\_\_

A.C.O. \_\_\_\_\_  
PLAN REV. \_\_\_\_\_

**CITY OF WICKLIFFE**  
DEPARTMENT OF PUBLIC SAFETY | DIVISION OF BUILDING & HOUSING

**APPLICATION FOR PERMIT**

(Permit will include ONLY such work as detailed in this application)

**DO NOT FILL IN**  
Total Floor Area \_\_\_\_\_  
Basement \_\_\_\_\_  
1st Floor \_\_\_\_\_  
2nd Floor \_\_\_\_\_  
3rd Floor \_\_\_\_\_  
Garage \_\_\_\_\_  
Dwelling \_\_\_\_\_  
Total Fees \$ \_\_\_\_\_

Wickliffe, O., \_\_\_\_\_, 20\_\_\_\_

**To the Commissioner of Building & Housing:**

I, \_\_\_\_\_ (Owner) hereby make application for a PERMIT to erect or build a structure as described in this application and the accompanying drawings which are a part of this application.

**LOCATION AND DESCRIPTION OF LOT**

Address: \_\_\_\_\_ Sublot No. \_\_\_\_\_  
Allotment \_\_\_\_\_ Side of Street \_\_\_\_\_ Ward \_\_\_\_\_  
Between \_\_\_\_\_ Street or Ave. and \_\_\_\_\_ Street or Ave.  
Being \_\_\_\_\_ feet front and \_\_\_\_\_ feet deep on the \_\_\_\_\_ side  
Being \_\_\_\_\_ feet rear and \_\_\_\_\_ feet deep on the \_\_\_\_\_ side  
Map Page \_\_\_\_\_

**DWELLINGS ONLY**

Purpose or Use \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_  
Construction \_\_\_\_\_ Class \_\_\_\_\_ Grade \_\_\_\_\_ Number of Families Occupying Building \_\_\_\_\_  
Total No. of Rooms \_\_\_\_\_  
Suite Size – 1R \_\_\_\_\_ 2R \_\_\_\_\_ 3R \_\_\_\_\_ 4R \_\_\_\_\_ 5R \_\_\_\_\_ 6R \_\_\_\_\_ 7R \_\_\_\_\_ 8R \_\_\_\_\_  
Roof Covering \_\_\_\_\_ Heating System \_\_\_\_\_ Fuel \_\_\_\_\_  
Number of Stairs \_\_\_\_\_ Footings \_\_\_\_\_ Foundation \_\_\_\_\_  
Shortest distance to buildings on adjoining lots \_\_\_\_\_ Shortest distance to buildings on the same lot \_\_\_\_\_  
Additional Description \_\_\_\_\_

\_\_\_\_\_ Estimated cost \$ \_\_\_\_\_

**MISCELLANEOUS – PRIVATE GARAGES, SHEDS, ETC.**

Purpose \_\_\_\_\_ No. of Cars \_\_\_\_\_  
Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_  
Material \_\_\_\_\_ Class \_\_\_\_\_ Grade \_\_\_\_\_  
Shortest distance to buildings on the same lot \_\_\_\_\_ Shortest distance to buildings on adjacent lots \_\_\_\_\_

Additional Description \_\_\_\_\_

\_\_\_\_\_ Estimated cost \$ \_\_\_\_\_

**DESCRIPTION OF BUILDING**

Purpose \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_

Occupancy on first floor \_\_\_\_\_ Occupancy on floors above \_\_\_\_\_

Brick or Frame \_\_\_\_\_ Roof Construction \_\_\_\_\_

Total number of units occupy building \_\_\_\_\_

Suite Size – 1R \_\_\_\_\_ 2R \_\_\_\_\_ 3R \_\_\_\_\_ 4R \_\_\_\_\_ 5R \_\_\_\_\_ 6R \_\_\_\_\_ 7R \_\_\_\_\_ 8R \_\_\_\_\_

Character of Soil \_\_\_\_\_ Footings \_\_\_\_\_ Foundation \_\_\_\_\_

Heating System \_\_\_\_\_ Will a Ventilating System be installed? \_\_\_\_\_ Type \_\_\_\_\_

Fuel \_\_\_\_\_ Area of Flue \_\_\_\_\_ Height above grade \_\_\_\_\_

No. of Stairs \_\_\_\_\_ Construction \_\_\_\_\_ Enclosure \_\_\_\_\_

No. of Elevators \_\_\_\_\_ Type \_\_\_\_\_ Enclosure \_\_\_\_\_

Will Sprinkler System be installed? \_\_\_\_\_ Kind \_\_\_\_\_

No. of Stand Pipes to be installed? \_\_\_\_\_ Where located? \_\_\_\_\_

Shortest distance to buildings on the same lot \_\_\_\_\_ Shortest distance to buildings on adjacent lots \_\_\_\_\_

Estimated Cost \$ \_\_\_\_\_ Class \_\_\_\_\_

Additional Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Estimated cost \$ \_\_\_\_\_

**ALTERATION OR ADDITION**

The present building is a \_\_\_\_\_ Story \_\_\_\_\_ structure, used or occupied as \_\_\_\_\_

By \_\_\_\_\_ families, and is \_\_\_\_\_ feet long and \_\_\_\_\_ feet wide. Class \_\_\_\_\_

The proposed Alteration or Addition consists of \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Length of Addition \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Class \_\_\_\_\_

Addition to be Used or Occupied as \_\_\_\_\_

Number of New Stairs or Fire Escapes \_\_\_\_\_

Will external or internal supports be removed or rebuilt \_\_\_\_\_

Est. Cost of Alteration \$ \_\_\_\_\_ Est. Cost of Additions \$ \_\_\_\_\_ Total Est. Cost \$ \_\_\_\_\_

The acceptance of the Permit herein applied for shall constitute an agreement on (my)(our) part to abide by all the conditions herein contained, and to comply with all ordinances of the City of Wickliffe and the laws of the State of Ohio relating to the work to be done thereunder; and said agreement is a condition of said permit.

It is a further condition of this permit that \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contractor \_\_\_\_\_ Owner \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Approved: \_\_\_\_\_ Building Commissioner

# Square Footage Form

PLEASE FILL OUT AND SUBMIT WITH BUILDING PLANS

GENERAL CONTRACTOR/OWNER NAME: \_\_\_\_\_

ADDRESS OF CONSTRUCTION: \_\_\_\_\_

## NEW DWELLINGS

1<sup>st</sup> Floor Square Footage \_\_\_\_\_

2<sup>nd</sup> Floor Square Footage \_\_\_\_\_

FINISHED Basement Sq Ftg \_\_\_\_\_

ATTACHED Garage Sq Ftg \_\_\_\_\_

Covered Porch (es) Sq Ftg \_\_\_\_\_

Covered Deck (s) Sq Ftg \_\_\_\_\_

Total Sq Ftg \_\_\_\_\_

(TOTAL OF COLUMN)

## ADDITIONS, ALTERATIONS, GARAGES, ACCESSORY BUILDINGS, MISCELLANEOUS

1<sup>st</sup> Floor Square Footage \_\_\_\_\_

2<sup>nd</sup> Floor Square Footage \_\_\_\_\_

FINISHED Basement Sq Ftg \_\_\_\_\_

Total Sq Ftg \_\_\_\_\_

(TOTAL OF COLUMN)

**APPLICATION FOR RESIDENTIAL BUILDING PERMIT PLAN REVIEW**

READ INSTRUCTIONS BEFORE COMPLETING FORM - Page 2 of 2 - PLEASE PRINT OR TYPE

DATE SUBMITTED: \_\_\_\_\_ PLUMBING: YES  NO   
STREET ADDRESS OF CONSTRUCTION: \_\_\_\_\_ S/L # \_\_\_\_\_  
CITY/TOWNSHIP: \_\_\_\_\_ PERM PARCEL #: \_\_\_\_\_

IS CONSTRUCTION IN THE FLOODPLAIN: YES  NO   
PROJECT TYPE: (Check all that apply) NEW DWELLING  ADDITION  ALTERATION   
DECK  POOL  CHANGE OF USE  DEMOLITION  FRAME  BRICK  CRAWL SPACE   
SLAB  BASEMENT  FINISHED BASEMENT w/plumbing  w/o plumbing   
NUMBER OF STORIES \_\_\_\_\_ GARAGE SIZE \_\_\_\_\_ CAR DETACHED  ATTACHED   
NUMBER OF FIREPLACES \_\_\_\_\_ FIREPLACE TYPE \_\_\_\_\_ WOODBURNER \_\_\_\_\_  
HEATING SYSTEM \_\_\_\_\_ FUEL TYPE \_\_\_\_\_ NUMBER OF FUEL PIPING OUTLETS \_\_\_\_\_  
EST CONSTRUCTION COST: \_\_\_\_\_ ZONING PERMIT #: \_\_\_\_\_

WELL OR PUBLIC WATER: \_\_\_\_\_ APPROVED WELL LOG #: \_\_\_\_\_  
UTILITIES APPROVAL DATE: \_\_\_\_\_ SEPTIC APPROVAL DATE: \_\_\_\_\_  
STORMWATER APPROVAL DATE: \_\_\_\_\_ SOIL & WATER APPROVAL DATE: \_\_\_\_\_

**PROPOSED STRUCTURE:**

DETAILED WORK DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Identify Square Footage For Proposed Addition:**

Basement: \_\_\_\_\_ 1<sup>st</sup> Flr: \_\_\_\_\_ 2<sup>nd</sup> Flr: \_\_\_\_\_ 3<sup>rd</sup> Flr: \_\_\_\_\_  
TOTAL SQ. FT. OF ALL FLOORS: \_\_\_\_\_

**EXISTING STRUCTURE:**

DETAILED WORK DESCRIPTION OF ALTERATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Identify Square Footage For Proposed Alteration:**

Basement: \_\_\_\_\_ 1<sup>st</sup> Flr: \_\_\_\_\_ 2<sup>nd</sup> Flr: \_\_\_\_\_ 3<sup>rd</sup> Flr: \_\_\_\_\_  
TOTAL SQ. FT. OF ALL FLOORS: \_\_\_\_\_

**Identify ENTIRE Square Footage For This Project:**

Basement: \_\_\_\_\_ 1<sup>st</sup> Flr: \_\_\_\_\_ 2<sup>nd</sup> Flr: \_\_\_\_\_ 3<sup>rd</sup> Flr: \_\_\_\_\_  
TOTAL SQ. FT. OF ALL FLOORS: \_\_\_\_\_

FIRE PROTECTION SYSTEM: Fire Sprinkler None  Partial  Total

ALL FEES ARE NONREFUNDABLE



# PRESCRIPTIVE PACKAGE WORKSHEET

DATE: \_\_\_\_\_

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

Builder Address: \_\_\_\_\_

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

Submitted By: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Zone Number **13**

Package Number: \_\_\_\_\_

## PROPOSED

Window Area  
 $100 \times \frac{\text{Window Area}}{\text{Gross Wall Area}} = \frac{\text{Proposed Window Area}}{\text{Gross Wall Area}} \%$

R-Value Description	Comments	Proposed R-Value
Ceiling	_____	R - _____
Well	_____	R - _____
Floor (Over Unconditioned Space)	_____	R - _____
Floor (Over Outside Air)	_____	R - _____
Basement Well	_____	R - _____
Slab Floor	_____	R - _____

U-Value Description	Comments	Proposed U-Value
Window	_____	U - _____
Door	_____	U - _____

Heating Efficiency \_\_\_\_\_ AFUE/HSPF \_\_\_\_\_  
 Efficiency of Proposed Heating Equipment \_\_\_\_\_ Make & Model Number (If High Efficiency) \_\_\_\_\_

## REQUIRED

\_\_\_\_\_ %  
 Maximum Window Area

Minimum R-Value
R - _____
R - _____
R - _____
R - _____
R - _____

Maximum U-Value  
 U - \_\_\_\_\_  
 U - 0.35

High  Normal  
 (Check One)

### Statement of Compliance

This home meets the requirements of the CABO Model Energy Code - 1992 Edition.

Builder/Designer	Company Name	Date
Building Official	Jurisdiction	Date

# 2019 Residential Code of Ohio (RCO) Systems Description Form

General Contractor: \_\_\_\_\_ Homeowner: \_\_\_\_\_

Office Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Homeowner Phone # \_\_\_\_\_

Project Description: \_\_\_\_\_

Address of Project: \_\_\_\_\_ City/Township: \_\_\_\_\_

## Electrical Design a,b

<u>Service Size (Amps)</u>	<u>Size of Service Entrance Conductors</u>	<u>Panel Location(s)</u>	<u>Number of Sub-Panels</u>	<u>Location</u>
<input type="checkbox"/> 100 Amp <input type="checkbox"/> 200 Amp <input type="checkbox"/> Over 200 Amp				<input type="checkbox"/> Overhead <input type="checkbox"/> Underground
<input type="checkbox"/> Upgrading Service From _____ To _____				
<input type="checkbox"/> Existing Service			<input type="checkbox"/> Adding Sub-Panel	

a. Provide a detailed electrical diagram for services over 200 amps for review and approval (see electrical fee schedule).

b. Provide detailed electrical and gas piping diagrams for generator installations (see electrical fee schedule).

## HVAC Design

<u>Heating Equipment Type, Size &amp; Efficiency</u>	<u>Design Heat Loss (Btu/h)</u>	<u>Type of Fuel</u>	<u>Location of Equipment</u>
<input type="checkbox"/> Forced Air Btu/h _____ Eff. _____ <input type="checkbox"/> Boiler Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump Btu/h _____ Eff. _____ <input type="checkbox"/> Electric kW _____ Eff. _____ <input type="checkbox"/> Geothermal kW (Btu/h) _____ Eff. _____ <input type="checkbox"/> Duct Extension Only		<input type="checkbox"/> Natural Gas <input type="checkbox"/> LP <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other _____	<input type="checkbox"/> Basement <input type="checkbox"/> Attic <input type="checkbox"/> Closet <input type="checkbox"/> Crawl Space <input type="checkbox"/> Outdoor
<u>Cooling Equipment Type, Size &amp; Efficiency</u>	<u>Design Heat Gain (Btu/h)</u>	<u>Location of Equipment</u>	
<input type="checkbox"/> AC Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump Btu/h _____ Eff. _____ <input type="checkbox"/> Geothermal kW(Btu/h) _____ Eff. _____		<input type="checkbox"/> Outdoor <input type="checkbox"/> Other _____	
<u>Area of Conditioned Space (sq. ft.)</u>		<u>Duct Size (Supply and Return)</u>	

## Fuel Gas Design

<u>Number of Fuel Gas Outlets</u>	<u>Size of Fuel Gas Main</u>	<u>Piping Materials</u>
		<input type="checkbox"/> Steel Pipe Sch. 40 <input type="checkbox"/> CSST <input type="checkbox"/> Other _____





# The City of Wickliffe

**Mayor**  
William A. Margalis

**Council President**  
David J. Krych

**Council at Large**  
Mark A. Iafelice  
Sherry Koski

**Ward 1**  
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343-7104

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140-943-7125

**Director of Finance**  
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Raymond F. Sack  
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**Chief of Police**  
Gandy E. Ice  
40-943-1234

**Chief of Fire**  
James G. Powers  
40-943-7140

**City Engineer**  
Peter J. Formica  
40-951-9000

**Director of Recreation**  
Timothy E. Stopp  
40-943-7120

**City Programs Director**  
Patricia A. Fowler  
40-943-7100

**Senior Center Director**  
Laureen Webster  
40-373-5015

**Economic Development Director**  
Jason Laver  
16-408-6969

## 2019 RESIDENTIAL CODE OF OHIO (RCO)

### ENERGY COMPLIANCE DECLARATION FORM

#### 2019 Residential Code of Ohio 1101.2 Compliance

Compliance shall be demonstrated by meeting the requirements of *one of the following options*:

1. The "International Energy Conservation Code"; or
2. Sections 1101 through 1104 of this chapter; or
3. Section 1105 – "The Ohio Home Builder's Association (OHBA) Alternative Energy Code Option:

#### Applicants shall indicate the energy compliance option below:

##### 2009 International Energy Conservation Code (IECC)

Please check one of the following:

REScheck based on the 2009 IECC: \_\_\_\_\_

Prescriptive method based on 2009 IECC Table 402.1.1 \_\_\_\_\_

Prescriptive method based on U-Factor alternative 2009 IECC 402.1.3. \_\_\_\_\_

Prescriptive method based on Total UA alternative 2009 IECC 402.1.4 \_\_\_\_\_

Simulated performance alternative 2009 IECC 405 \_\_\_\_\_

**2019 RCO Sections 1101-1104, Prescriptive Method**

Please check one of the following:

Testing option per 1102.4.2.1 (blower door) \_\_\_\_\_

Visual inspection option per 1102.4.2.2 (third party) \_\_\_\_\_  
inspection

**2019 RCO Section 1105 "The Home Builder's Association  
Alternative Energy Code Option"**

Please check one of the following:

Compliance Path #1 \_\_\_\_\_

Compliance Path #2 \_\_\_\_\_

\*Air leakage testing (blower door) will take effect January 1, 2013

\*Duct tightness testing will take effect January 2, 2014

## Lake County Department of Utilities Sewer and Water Availability Notice

The following property or properties have been reviewed for the availability of water or sanitary sewer service only:

Contractor: \_\_\_\_\_

Subdivision: \_\_\_\_\_ City/Twp: \_\_\_\_\_

<u>Property Address</u>	<u>Parcel Number</u>	<u>Lot Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **FOR UTILITIES OFFICE USE ONLY**

#### Lake County Utility Services Available

- L.C.D.U. Sanitary Sewer Service is available for the above property or properties
- L.C.D.U. Domestic Water Service is available for the above property or properties

#### Lake County Utility Services NOT Available

- L.C.D.U. Sanitary Sewer Service is NOT available for the above property or properties
- L.C.D.U. Domestic Water Service is NOT available for the above property or properties

Comments: \_\_\_\_\_

#### Utility Services from Alternate Provider

- Sanitary Sewer Service may be available from an alternate service provider
- Domestic Water Service may be available from an alternate service provider

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_



DEPARTMENT OF PUBLIC SAFETY  
 DIVISION OF BUILDING ENGINEERING & INSPECTION  
**APPLICATION FOR SITE/GRADE PLAN REVIEW**

DATE: \_\_\_\_\_  
 Owner: \_\_\_\_\_  
 Project Address/Sublot No. \_\_\_\_\_  
 Engineer/Surveyor: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Site Plan - R1 and RMF Per Unit	<b>\$600.00</b>
Site Plan - OB, LB, GB, IR, CM, IND	<b>\$1200.00</b>

The City Engineer shall estimate the cost of the site plan review. If the estimated cost exceeds the deposit, the applicant shall be informed by the City Engineer's office and the estimated costs shall be directed to be deposited to the City of Wickliffe, prior to the Engineer's examination of such site plan.

Fee \$600.00 (RES.)	Estimate \$ _____ Add'l Deposit _____
Fee \$1200.00 (Other)	Return to Applicant if any \$ _____

The applicant shall be charged for the actual costs incurred by the City Engineer for the review of the site plan, inspection of the site, and checking of the grade, and any and all other expenses associated with the site plan review. Such costs shall be computed on the basis and in accordance with the legislation governing the right of compensation for the City Engineer at the time. Any deficiency between the actual costs of the services rendered by the City Engineer and the deposit paid by the applicant, shall be paid to the City prior to the approval of the final site plan. Any excess of the deposit over the actual costs of the City Engineer and permit fee shall be returned to the applicant.

Deposited By: \_\_\_\_\_  
 Refund To: (if any) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_



FOR CITY ENGINEER  
INSPECTION CHECK LIST

SITE PLAN RECEIVED/DATE: \_\_\_\_\_

Approved By: \_\_\_\_\_  
City Engineer

Date: \_\_\_\_\_

Foundation Grade Check Received/Date: \_\_\_\_\_

Approved By: \_\_\_\_\_

Paving Sub-Base Grade Check Received/Date: \_\_\_\_\_

Approved By: \_\_\_\_\_

Final Site Plan Received/Date: \_\_\_\_\_

Approved By: \_\_\_\_\_

No construction permits or certificate of zoning compliance shall be issued until such time as the City Engineer has approved the submitted site plan pursuant to City Ordinance 1107.02 (a).

At such time as the builder or other permit holder has constructed the foundation or slab, he/she shall request through the Building Commissioner (440) 943-7115, that the City Engineer check the grade. **NO further construction shall be permitted** until the Engineer has checked such foundation and found it to be in accordance with the approve site plan.

When the subbase of the hard surface paved area and other areas that require grade changes have been completed, the permit holder shall again request (440) 943-7115 that the City Engineer check the grade. **NO further construction shall be permitted** until the City Engineer has checked and approved these elevations.

By my signature, I certify that I have read and fully understand the intent of this document.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

APPLICATION FOR APPROVAL UNDER  
**MUNICIPAL EROSION AND SEDIMENT CONTROL RULES**

LAKE COUNTY SOIL AND WATER CONSERVATION DISTRICT

ALL NECESSARY INFORMATION MUST BE PROVIDED ON THIS FORM. THE REVIEW AND INSPECTION FEE SHALL BE SUBMITTED WITH THE EROSION AND SEDIMENT CONTROL (ESC) PLANS, ESC PLANS SHALL NOT BE REVIEWED UNTIL THE FEE HAS BEEN PAID.

**1. OWNER INFORMATION**

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

Address \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**2. AGENT/CONTRACTOR/HOMEBUILDER INFORMATION**

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

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

Address \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**3. SITE LOCATION INFORMATION**

Facility/Site Name \_\_\_\_\_ Township \_\_\_\_\_

Address \_\_\_\_\_ Project Type \_\_\_\_\_  
(subdivision, commercial, single lot, etc.)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**4. SOIL-DISTURBING ACTIVITY INFORMATION**

Total Project Area (in acres) \_\_\_\_\_ Proposed Start Date (mo/day/yr) \_\_\_\_\_

Estimated Completion Date (mo/day/yr) \_\_\_\_\_

**5. RECEIVING WATER INFORMATION**

Receiving Water Body \_\_\_\_\_ Watershed Name \_\_\_\_\_

**6. ADDITIONAL NATURAL RESOURCE PERMITS (if applicable)**

Ohio Environmental Protection Agency NPDES Permit # \_\_\_\_\_ Or NOI (date sent) \_\_\_\_\_

U.S. Army Corps of Engineers Section 404 Permit # \_\_\_\_\_ Or NWP # \_\_\_\_\_

Other Pertinent Natural Resource Permits Required:

**7. PAYMENT INFORMATION**

**Make Checks Payable to: Lake SWCD**

Date of Check \_\_\_\_\_ Check Number \_\_\_\_\_ Amount \_\_\_\_\_

**8. CERTIFICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision and are to the best of my knowledge and belief, true, accurate, and complete.

Printed Name \_\_\_\_\_ Affiliation \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## MUNICIPAL REVIEW AND INSPECTION FEES

### FULL SWP3 PLAN

Commercial, Industrial, Residential Subdivision	10 acres or less	\$300.00
	More than 10 to and including 20 acres	\$500.00
	More than 20 to and including 50 acres	\$700.00
	More than 50 acres	\$1,000.00
Non-Residential Individual Development Site	Individual Development greater than one acre	\$250.00
Multi-Family Development Site	Any acreage development site	\$250.00
A Non-Residential lot within a Common Plan of Development	Any lot one acre or greater within a Common Plan of Development	\$100.00
General Clearing/Grading Recreational Multi-Family Development within a Common Plan of Development	Any lot one acre or greater withing a Common Plan of Development	\$100.00

### ABBREVIATED SWP3 PLAN

All new, single-family residential projects	Any acreage project	\$10.00
Any residential additions, accessory buildings, or general clearing	Projects greater than 1/10 of an acre	\$10.00
Non-Residential Individual Development Site	Project greater than 1/10 acre and less than one acre	\$10.00

# CITY OF WICKLIFFE, BUILDING DEPARTMENT

## INSPECTION PROCEDURE LIST

As you complete particular sections of your construction, you must call (440) 943-7115 and request inspection BEFORE proceeding to next phase. Otherwise, you may be required to tear down a portion of your work to show visible proof that a concealed section is up to Code. **Call 24 hours in advance, or at times before 9:00 am the same day, so inspection can be properly scheduled.**

Below is the order of inspection required and is **MANDATORY:**

Must comply with 2013 Ohio Residential Code including compliance with Energy Code 1101.2.

City Engineer will take a grade reading before footers are poured to make sure top of block is consistent with proposed grade level for new construction. Call 440 951-9000/ask for Pete Formica

Footer Inspection – before concrete footings are poured

Foundation Inspection – before backfilling

Slab Inspection – before it is poured

Framing Inspection – after roofing, framing, fire blocked and bracing are in place

Rough Plumbing/Rough Heating/Rough Electrical

Rough Electrical – (reminder all permits/inspections thru Lake County Bldg) call 440 918-2636, they need at least 24 hour notice. All electrical contractors to register with the City also.

Insulation/Drywall

Final Plumbing/Final Heating/Final Electric by Lake County Bldg. Dept.

Final Sewer Dye Test (make sure sanitary and storm tees are exposed)

Final As Built/Site Plan (after rough grading is complete by Engineer), submit 3 sets of as-built certification is approved by City Engineer, otherwise no final refund on deposit, or temporary occupancy permit will be issued.

### **Fireplace Inspections are as follows:**

Foundation/First Flue/Prior to Facing Fireplace/Final

Pre Fab or Wood Stoves required Framing & Final Inspections.