



**ASHTABULA COUNTY
BUILDING DEPARTMENT**
25 W Jefferson Street
Jefferson OH 44047-1092
P (440) 576-3737 Fax (440) 576-3739
CAEllsworth@ashtabulacounty.us

COMMERCIAL PERMIT APPLICATION

Office Use Only

MASTER PERMIT NO. _____

ASSOCIATED PERMIT NO. _____

DATE OF APPLICATION: _____

PARCEL NUMBER: _____

Required on all applications

PROJECT NAME: _____

PROJECT ADDRESS: _____

CITY, TWP OR VILLAGE: _____

PROPERTY OWNER

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

GENERAL CONTRACTOR

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

Must be registered with Ashtabula County Building Department

SUBMITTER Owner Tenant Design Professional

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

ELECTRICAL CONTRACTOR (OCILB Licensed)

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

Must be registered with Ashtabula County Building Department

DESIGN PROFESSIONAL Architect Engineer Other

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

Ohio Registration/Certification No. _____

MECHANICAL CONTRACTOR (OCILB Licensed)

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE: _____

EMAIL: _____

Must be registered with Ashtabula County Building Department

PROJECT TYPE:

- New Structure Addition Renovation Industrialized Unit
- Industrialized Unit Change of Occupancy Fire Suppression
- Fire Alarm Exhaust Hood Hood Suppression
- Existing Certificate of Occupancy Electrical Service Request

EXISTING USE GROUP:

- Assembly **SELECT TYPE** A-1, A-2, A-3, A-4, A-5
- Business Educational
- Factory (F-1, F-2) Hazardous (H-1, H-2, H-3, H-4, H-5)
- Institutional (I-1, I-2, I-3, I-4) Mercantile
- Residential (R-1, R-2, R-3, R-4) Storage (S-1, S-2)
- Utility Mixed Use (check all that apply)
- If Mixed Use Non-Separated Separated Rating in hours _____

EXISTING CONSTRUCTION TYPE(S):

- 1-A 1-B 2-A 2-B 3-A 3-B
- 4 5-A 5-B

EXISTING OCCUPANT LOAD: _____

PROJECT INCLUDES: *Check all that apply*

- Structure Plumbing Electrical
- Mechanical Exhaust Hood Hood Suppression
- Fire Alarm - # of devices _____
- Fire Suppression - # of devices _____
- Refrigeration Hydronics Electrical Service

PROPOSED USE GROUP:

- Assembly **SELECT TYPE** A-1, A-2, A-3, A-4, A-5
- Business Educational
- Factory (F-1, F-2) Hazardous (H-1, H-2, H-3, H-4, H-5)
- Institutional (I-1, I-2, I-3, I-4) Mercantile
- Residential (R-1, R-2, R-3, R-4) Storage (S-1, S-2)
- Utility Mixed Use (check all that apply)
- If Mixed Use Non-Separated Separated Rating in hours _____

PROPOSED CONSTRUCTION TYPE(S):

- 1-A 1-B 2-A 2-B 3-A 3-B
- 4 5-A 5-B

PROPOSED OCCUPANT LOAD: _____

Note: If the occupant load is increased as a result of an addition, renovation or change of use/occupancy, submit verification that adequate plumbing fixtures are provided for the total occupant load.

EXISTING SQUARE FOOTAGE: _____

EXISTING NUMBER OF STORIES: _____

PROPOSED SQUARE FOOTAGE: _____

PROPOSED NUMBER OF STORIES: _____

FIRE SUPPRESSION SYSTEM:

- NFPA 13 NFPA 13D NFPA 13R
- Limited Area In-Rack Light Hazard
- Ordinary Hazard Group 1 Ordinary Hazard Group 2
- Extra Hazard Group 1 Extra Hazard Group 2

Sprinkler Demand @ Base of Riser: _____ gpm @ _____ psi
 Sprinkler Demand @ Base of Standpipe: _____ gpm @ _____ psi
 Hose Allowance: _____ gpm No. of Devices Installed _____

ZONING PERMIT NO: _____

DATE OF ISSUE: _____

Submit copy of zoning permit with this application

VALUATION OF PROJECT: \$ _____

CERTIFICATION: I certify that I am the owner or owner's authorized agent and I have read and examined this application and that all the information is true, accurate and complete to the best of my knowledge. I acknowledge that I am responsible for all fees associated with this submittal. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I authorize the Ashtabula County Building Department to enter this property for the purpose of site inspections for the duration of this project. **Falsification of a public document is a violation of the Ohio Revised Code, Section 2921.13(A)(5), a misdemeanor of the first degree, punishable by up to six (6) months imprisonment and a fine of \$1,000 or both.**

Print Name _____

Company _____

Signature _____

Date _____

NOTE: THE DOCUMENTATION THAT ACCOMPANIES THIS APPLICATION WILL BE REVIEWED FOR CONFORMANCE WITH THE OHIO BUILDING CODE ONLY. IT IS THE RESPONSIBILITY OF THE OWNER TO OBTAIN ALL OTHER APPROVALS REQUIRED PRIOR TO THE START OF CONSTRUCTION (I.E. ZONING, PLUMBING, EPA, ETC.).