

ROSS COUNTY BUILDING DEPARTMENT APPLICATION FOR WAVERLY RESIDENTIAL PLAN APPROVAL

Suite 201, 15 N. Paint Street
Chillicothe, OH 45601

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www.rossplanningandbuilding.com
SUBMIT ONE APPLICATION FOR EACH BUILDING OR STRUCTURE
PLEASE PRINT OR TYPE BELOW

1. Owner's Name: _____

Owner's Mailing Address: _____

City/State: _____ Zip Code: _____

Owner's Telephone No. _____

2. Plans Prepared By: _____ OH Registration No. _____

A. OH Registered Architect

B. OH Professional Engineer

C. OH Sprinkler System Designer

D. Other _____

3. A. Description of job _____

B. Nature of job _____

Change of Use New Addition Alteration Chapter 94D

C. Previous Building Permit# _____

D. Waverly Zoning Permit Y N Floodzone Y N

4. A. Current OBC Use Group _____

B. Proposed OBC Use Group _____

DR1 DR2 DR3 DR4 DU

C. If building is Use Group R1, R2, R3 or R4, specify the number of apartments or units _____

D. Cost of work covered by this application: \$ _____

CERTIFICATION: (ORC 105.35)

I certify that I am the _____ Owner _____ Agent for the owner and all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown in #5.

Signature: _____

Printed Name: _____

Title: _____ Date: _____

Revised 10/9/2011

PERMIT # _____

5. Submitter's Name: _____

Name of Firm _____

Sheet Address _____ Zip Code _____

City/State _____ Zip Code _____

Telephone No. _____

Email Address _____

6. Name of Person Drawing Plans: _____

Street Address _____

City/State _____ Zip Code _____

7. Contractor: _____

Contractor Contact Name _____

Sheet Address _____

City/State _____ Zip Code _____

Telephone No. _____

8. Sheet Address of project _____

City/State _____ Zip Code _____

FEE CALCULATION:

9. New Residential (\$950.00) _____

10. Addition/Garage/Accessory Bldg. (\$450.00) _____

11. Special Inspections _____ (@ \$85.00 each) _____

12. SUBTOTAL: _____

BOARD OF BUILDING STANDARDS FEE (1%) _____

TOTAL: \$ _____

*NOTE: The blanket fee includes the following types of inspections (including plan review): temporary electric; footer (crawl space or footer and drains for basement - poured walls); basement slab & floor drains; masonry - anchor bolts, and sill plates; rough frame and roof; rough electric; installation HVAC; drywall (before mud); plumbing; final electric; HVAC; framing and final inspection for Certificate of Occupancy. Blanket fees do not include re-inspection, after-hours inspection, or temporary occupancy.

Any additional inspections will be billed at the rate of \$85.00 per inspection.