

# TRUMBULL COUNTY - OHIO

BUILDING INSPECTION DEPARTMENT

WARREN, OH 44481 PHONE: 330-675-2467

## APPLICATION FOR PLAN APPROVAL

|           |  |                                       |  |   |
|-----------|--|---------------------------------------|--|---|
| <b>1</b>  | <b>Scope of Project:</b> (Check if Included)                       | <b>2</b>                              | City of Township _____   |   |
|           | Structural _____ Hood _____  | <b>3</b>                              | <b>Is this project located in an incorporated City or Village?</b> ___ Yes ___ No  |   |
|           | Mechanical _____ Hood Suppression _____                            | <b>4</b>                              | <b>Have you contacted your local Flood Plain Administrator?</b> ___ Yes ___ No   |   |
|           | Electrical _____ Cell Tower _____                                  | <b>5</b>                              | <b>Enter the Number of sheets in your drawing set</b> _____  |   |
|           | Sprinkler _____  | <b>6</b>                              | <b>Nature of Project?</b> ___ New ___ Alteration ___ Addition ___ Change of Occupancy  |   |
|           | Fire Alarm _____   | <b>7</b>                              | <b>Previous or Related Certificate of Plan Approval:</b> _____   |   |
|           | Other Explain _____  | <b>8</b>                              | <b>Parcel ID</b> _____ -- _____ (Trumbull Co. Auditor's No.)   |   |
| <b>9</b>  | <b>Name of Project</b>   |                                       |  |   |
|           | Exact address of Project _____                                     |                                       |  |   |
|           | City and Zip Code _____  |                                       |  |   |
|           | Directions _____   |                                       |  |   |
| <b>10</b> | <b>Owner of Project</b>  |                                       |  |   |
|           | Attention _____  |                                       |  |   |
|           | Owner's address _____  |                                       |  |   |
|           | City, State & Zip _____  |                                       |  |   |
|           | Contact Information _____  | Phone: _____                          | Fax: _____   |   |
| <b>11</b> | <b>Submitter</b>   |                                       |  |   |
|           | Submitter's address _____  |                                       |  |   |
|           | City, State & Zip _____  |                                       |  |   |
|           | Contact Information _____  | Phone: _____                          | Fax: _____   |   |
| <b>12</b> | <b>Do You Prefer E-Mail Notification?</b> ___ Yes                  | E - Mail Address: _____               |  |   |
| <b>13</b> | <b>Plans Prepared by:</b>  |                                       |  |   |
|           | Please Provide Reg. / Cert. No. _____                              | _____ Architect                       | _____ Engineer   | _____ Certified Sprinkler / F/ A Designer |
|           | City, State & Zip _____  |                                       |  |   |
|           | Contact Information _____  | Phone: _____                          | Fax: _____   |   |
| <b>14</b> | <b>Do You Prefer E-Mail Notification?</b> ___ Yes                  | E - Mail Address: _____               |  |   |
| <b>15</b> | Type of Construction _____   | <b>22</b>                             | If Plans are submitted as the result of a previous Adjudication Order, enter order number here: _____  |   |
| <b>16</b> | Current Use Group _____  | <b>23</b>                             | I hereby certify that I am the _____ Owner _____ Agent of the Owner (Select one) and that 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 above: |   |
| <b>17</b> | Proposed Use Group _____   |                                       | _____<br>Signature   |   |
| <b>18</b> | Cost of Work Covered by this Application (Round to 1,000) \$ _____ | _____<br>print or type name of signer |  |   |
| <b>19</b> | Total Square Footage (Round to 100 Sq.Ft.)                         | Struc                                 | Elect  | Mech                                      |
| <b>20</b> | Sprinkler Square Footage (Round to 100 Sq.Ft.)                     | _____<br>Date Received                |  |   |
| <b>21</b> | Number of Fire Alarm Devices _____                                 |                                       |  |   |
| <b>22</b> | <b>Official Use Only:</b>  | Application No: _____                 | Reviewed by: _____   |   |
|           |  |                                       | Mail In: _____   | Walk In: _____                            |