



City of Harrison
 Building Department
 300 George Street
 Harrison, Ohio 45030

Phone: 513-202-8494
 Fax: 513-202-8457

B

Application Date: _____

Permit Application For: New Building, Addition, Alteration, Repair, Wrecking, Moving

1. (a N S E W side of _____ Street Zip Code: _____ St. No. : _____
 (b) _____ feet, N S E W, from intersection of _____ Lot No.: _____ Par: _____
 Section No. or
 2. New Subdivision only _____ Page: _____ Book: _____ Municipality: _____

3. IDENTIFICATION	NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	TEL. NO.
OWNER						
CONTRACTOR						
PLANS BY						

ALL APPLICANTS COMPLETE A. THROUGH J.

A. TYPE OF IMPROVEMENT

- 1. New Building
- 2. Addition
- 3. Alteration
- 4. Repair
- 5. Wrecking (Demolition): Residential Accessory Building
- 6. Moving
- 7. Other _____ (specify)

Describe briefly proposed work or uses:

D. RESIDENTIAL

- 11. One-Family
- 12. Two-Family
- 13. Three-Family
- 14. Accessory Garage
- 15. Car Port
- 16. Swimming Pool Above-Gr. Tool Shed In-Ground
- 17. Other _____

E. TYPE OF WATER SUPPLY

- 18. Public
- 19. Private (Well, Cistern)

F. FOR RESIDENTIAL BUILDINGS ONLY

- 20. Number of Bedrooms _____
- 21. Number of Bathrooms _____
- 22. No. of Off-Street Parking Spaces _____

G. PRINCIPAL TYPE OF FRAME

- 23. Masonry (Wall Bearing)
- 24. Structural Steel
- 25. Wood Frame
- 26. Masonry Veneer
- 27. Reinforced Concrete
- 28. Other _____

H. AIR CONDITIONING

- 29. Will there be Air Conditioning in this building?
 Yes No New Ext.

I. TYPE OF HEATING FUEL

- 30. Electricity
- 31. Gas
- 32. Oil
- 33. Coal
- 34. L.P. Gas
- 35. Other _____

J. TYPE OF SEWAGE DISPOSAL

- 36. Public Sewer
- 37. Private System (Septic Tank, etc.) _____

B. OWNERSHIP

- 8. Private
- 9. Public (Federal, State, Local)

C. COST (omit cents)

10. Estimated cost of improvement for which this application is being made: \$ _____ .00

The owner of this building and undersigned do hereby covenant and agree to comply with all the laws of the State of Ohio and the ordinances of the City of Harrison pertaining to building and buildings, and to construct the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and certify that the information and statements given on this application, drawings and specifications are to the best of their knowledge, true and correct.

Application by: _____ Address: _____

DO NOT WRITE BELOW THIS LINE (office use)

Construction Classification: _____
 Cubic Ft. and Base: _____
 Heating: _____
 Certificate of Occupancy: _____
 Driveway: _____
 TOTAL (less Zoning): _____

Zoning Approved by: _____ Date: _____
 Construction Drawings Approved by: _____ Date: _____
 Permit Approved for Issue by: _____ Date: _____

Date Permit Issued: _____	Permit Number: _____	Permit and Inspection Fee: _____
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