



# City of Harrison

300 George Street • Harrison, Ohio 45030 • 513-367-2111

## COMPREHENSIVE REVIEW CHECK-OFF SHEET

File No. \_\_\_\_\_ Application No. \_\_\_\_\_ Date Filed \_\_\_\_\_

(Please review Project, as applicable, and check Approved or Disapproved, then sign, date, and fee. Return this sheet to the Coordinator as soon as possible.)

PROJECT: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

OWNER: \_\_\_\_\_

COORDINATOR: Name \_\_\_\_\_ Phone \_\_\_\_\_

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

ESTIMATED COST OF CONSTRUCTION \$ \_\_\_\_\_

(Office Use Only)

	Approved / Disapproved /	Signature	/ Date /	Fees
Police Dept..	_____ / _____ /	_____ /	_____ /	_____
Fire Dept.:	_____ / _____ /	_____ /	_____ /	_____
Sprinkler Required:	_____ yes	_____ no		
Utilities Dept.:	_____ / _____ /	_____ /	_____ /	_____
Zoning Dept.:	_____ / _____ /	_____ /	_____ /	_____
Building Dept. (Coordinator)	_____ / _____ /	_____ /	_____ /	_____
(Engineer)	_____ / _____ /	_____ /	_____ /	_____
Planning Commission:	_____ / _____ /	_____ /	_____ /	_____
Traffic Engineer (T.E.C.):	_____ / _____ /	_____ /	_____ /	_____

Total Review Fees: \_\_\_\_\_

(Utility fees to be paid to Utilities Dept. before taps are made)