

OHIO APPLICATION FOR BUILDING PLAN APPROVAL

This form is also available at www.com.ohio.gov/dico
Submit one application per building or structure; all sections must be completed, See instruction sheet for details.

1 SCOPE OF PROJECT:	2	TYPE OF PROJECT:	3	PHASED PLAN REVIEW:
				Footing & Foundation
Building General Sprir	nkler System	New Building Constructio	n	Building Slab
Mechanical Fire	Alarm	Alteration		Building Shell
Electrical Indu	strialized unit	Building Addition		Interior Partitions
_		Change of Occupancy		Building Systems
4 APPLICATION RELATED INFOR	MATION:			
 Is this project being submitted 	d as a result of a previo	ous preliminary plan review?		
No Yes, please	e provide the prelimina	ry plan review CPA number:		
 Has this building received any 	certificate of plan app	proval before this application?		
No Yes, please	e provide all previous o	or related CPA numbers:		
 Is this application being subm 	nitted as a result of a N	lotice of Violation or Adjudication	n Order th	nat you received?
No Yes, please	e provide the adjudicat	ion order number:		
 Total number of sheets in one 	e set of your drawings	for this application?		
5 DDO IECT/DUIL DING LOCATION	1.			
5 PROJECT/BUILDING LOCATION		Ctract Address		
				Country
		Zip Code		County
Directions	incomparated situation	washin anvillana? Vaa		Na
Is this project /building located in ar In this project /building located within		· · · · · · · · · · · · · · · · · · ·		No
 Is this project/building located within 	n your local flood plain	? Yes		No
6 BRIEF DESCRIPTION OF THE S	COPE OF WORK CO	VERED UNDER THIS APPLICA	ATION:	
7 BUILDING OWNER INFORMATION	ON:			
7 BUILDING OWNER INFORMATION	DN:	Attention:		
	ON:	Attention:	State	Zip
Name of owner		City	_	Zip
Name of ownerStreet Address		City	_	
Name of ownerStreet Address		City	_	
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION:	Fax	City E-mail _		
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant	Fax	City E-mail Attention:		
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address	Fax	City E-mail Attention:	State	Zip
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address	Fax	City E-mail Attention:	State	
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No.	FaxFax	City E-mail Attention:	State	Zip
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION:	Fax Fax Fax Architect	City E-mail Attention: E-mail E-mail E-mail E-mail E-mail E-mail E-mail Engineer Engineer	State	Zip rotection system designer
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer	Fax Fax Architect	City E-mail City Attention: E-mail E-mail Ohio registration N	State Fire pi	Zip rotection system designer
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer Street Address	Fax Fax Fax Architect	City E-mail Attention: City E-mail E-mail E-mail Ohio registration N City City Ohio registration N	State Fire pi	zip rotection system designer Zip
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer Street Address	Fax Fax Fax Architect	City E-mail Attention: City E-mail E-mail E-mail Ohio registration N City City Ohio registration N	State Fire pi	Zip rotection system designer
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer Street Address	Fax	City E-mail Attention: City E-mail E-mail E-mail Ohio registration N City City Ohio registration N	State Fire pi	zip rotection system designer Zip
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer Street Address Phone No.	Fax	City E-mail Attention: City E-mail Engineer Ohio registration N City E-mail	State Fire pi lo.: _ State	zip rotection system designer Zip
Name of owner Street Address Phone No. 8 APPLICANT INFORMATION: Applicant Street Address Phone No. 9 DESIGNER INFORMATION: Designer Street Address Phone No. 10 BUILDING CODE INFORMATION	Fax	City E-mail Attention: City E-mail E-mail Engineer Ohio registration N City E-mail Groups building, or the entire building in the entire	State Fire pilo.: State	Zip rotection system designer Zip zip single use group building)



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Page 2

11	11 GENERAL BUILDING INFORMATION: (The following information applies to the <i>entire building</i> , not just construction area.)					
Building Information:						
	Use group(s)?	Mixed use groups?	No	Yes _	Separated	Non-separated
	Construction type?	Building height (FT)?		_ No. of s	stories?	
	Occupant load?	Storage height (FT)?		_ Storage	e aisle width (FT)	?
•	Fire Protection Systems: (Enter the type	e of system such as NFPA 13	, NFPA 72	, etc., if kr	nown. Enter "N/A"	if not applicable)
	Building sprinkler system? Sprinkler demand @ base of riser (PSI)?					
	Limited area sprinkler system?	Type 1 hood sprinkler?		ler? In-Rack sprinkler system?		
	Building fire alarm system?	Fire detection syst	em?	m? Smoke detection system?		on system?
12	APPLICATION EFES:	Paid by: Cash	Check		Credit card	ISTV
12	APPLICATION FEES:	- ald by Cash				
•	Total square footage of construction are	ea (Round up to the next 100	square fee	et):		
	Building Mechanical	Electrical		Sprin	nkler	I.U.
	Total linear footage of construction item	s not covered under the squa	re footage	:		
	Building Mechanical	•	-		ber of alarm device	ces
_	Total application fees (from fee worksheet) Estimated construction cost:					
13	CERTIFICATION:		14 THI	E AREA BE	ELOW IS FOR OFF	ICIAL USE ONLY:
	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 above.		Date rece			No.:	
		Check No	:	Verif	fication #	
		Processe	d by:		Walk in Mail in	
Sign	nature					
Prin	t Name:	Date				

DICL 3016 (Rev. 03/16/2017)

"An Equal Opportunity Employer and Service Provider"

Notes:

Effective July 1, 2009, the maximum number of inspections(excluding plumbing and medical gas) included in the fees provided for in Table 115.2 of the Ohio Building Code (OBC) will be as indicated in the chart below. Any additional inspections will be subject to a charge of \$150 re-inspection fee as provided for in section 115.6 OBC.

Total square footage / Linear footage	Maximum Number of Inspections included in the permit fees
0-2,500	5 per each scope of project
2,501-10,000	6 per each scope of project
10,001-20,000	9 per each scope of project
20,001-30,000	10 per each scope of project
> 30,000	Add 1 inspection per each additional 10,000 s.f.

^{**}Please note that the number of allocated inspections does not include fire protection system acceptance tests and inspections by state or local fire officials.

Changes After Final Approval

According to section 115.2.4 OBC, if changes are made to construction documents after final plan approval has been issued and it requires resubmission, the review and approval of the changes will be subject to a \$250 processing fee and a \$100/hour fee for examination by a Plans Examiner. If an inspection cannot be completed due to the changes that have not been approved by a plans examiner, an additional \$150 re-inspection fee will be required regardless of whether the allowed number of inspections have occurred.

DIRECTIONS FOR COMPLETING OHIO APPLICATION FOR BUILDING PLAN APPROVAL

In accordance with Ohio Administrative Code (OAC) Chapter 4101:1-1-01, pursuant to Ohio Revised Code (ORC) Section 3791.04, before beginning the construction, erection or manufacture of any building for which construction documents are required, including all industrialized units, the owner shall submit three (3) copies of construction drawings to this division for approval. Two (2) additional sets of plans are required when the division has jurisdiction for the Plumbing and/or medical gas. The construction documents shall be accompanied with the application form and attached worksheets. The construction documents shall be prepared by a registered design professional pursuant to OAC 4101:1-1-01. An examination and inspection fee will be assessed at the time of submittal as outlined in OAC 4101:1-1-01.

Application Directions: Complete page one of the application and attached worksheets as outlined below. All boxes, 1 through 14, must be completed in full or the application will be returned. Send this completed form along with all required documents to "Ohio Department of Commerce, Division of Industrial Compliance, Bureau of Building Code Compliance, 6606 Tussing Road, Reynoldsburg, Ohio 43068-9009"

- SCOPE OF PROJECT: Check all the boxes that apply to the scope of work proposed in this project. Every scope of
 work checked must be accompanied with the appropriate fees. Without establishing the proper scope of work, the
 division will be unable to establish the inspection schedule for the project. Please note that "Building General" refers
 to all "general trade" work in the building including ceiling panels/grids, non-loadbearing partitions, flooring, etc.;
 NOT just structural loadbearing components of the building.
- 2. **TYPE OF PROJECT:** Check one of the types of projects from the list.
- 3. **PHASED PLAN REVIEW:** If you are applying for a phased plan approval, check all phases of the plan reviews that are applicable to this project. The plans examiner will review your plans according to the phased schedule. If you are not applying for a phased plan review, leave all boxes blank.
- 4. **APPLICATION RELATED INFORMATION:** Answer each of the questions in this block and provide additional information accordingly. Complete answers to the questions will help the division process and review the project accurately.
- 5. **PROJECT/BUILDING LOCATION**: Please provide complete information identifying the location of the building where the construction or renovation will occur. This will help the division determine the proper jurisdiction for the project.
- 6. **BRIEF DESCRIPTION OF THE SCOPE OF WORK COVERED UNDER THIS APPLICATION:** Please provide a brief description of the scope of work. Please include the names of the areas or rooms affected by the construction when only a portion of building is covered under the permit application. The description provided will be shown on your certificate of use and occupancy.
- 7. **BUILDING OWNER INFORMATION**: Please provide complete answers to each item. If the building is owned by a corporation, please provide the name of the corporation and identify a contact person in the section called "Attention.".
- 8. **APPLICANT INFORMATION**: Provide complete information. All project correspondences will be directed to the project applicant.
- 9. **DESIGNER INFORMATION**: Section 106.2 of the Ohio Building Code requires that the design professional be identified including the design professional's Ohio registration number.
- 10. **BUILDING CODE INFORMATION**: Information provided applies to the construction area in a mixed use groups building, or the entire building if it is a single use group building. For change of occupancy, the term "Current use group" refers to the approved use group under the previous occupancy. For information concerning the term "Proposed use group", please refer to Chapters 3 and 6 of Ohio Building Code for the proper classification.
- 11. **GENERAL BUILDING INFORMATION**: The information provided applies to the entire building and is not limited to the construction area. Even when the proposed project is a partial building renovation or a building addition, the information for the entire building is required. The information provided will be shown on your certificate of use and occupancy in accordance with section 111 of the Ohio Building Code.
- 12. **APPLICATION FEES**: Please check one of the preferred payment methods and provide the square footage or linear footage of the areas affected by the construction. Please refer to the Fees Worksheet in this package for more details.
- 13. **CERTIFICATION**: The application cannot be processed if this section is not complete.
- 14. OFFICE USE ONLY: This section is reserved for our office use only. Please do not mark in this area.

Once the plans have been examined and approved, a Certificate of Plan Approval will be issued to the owner along with two sets of construction documents. One of the sets of construction documents must remain at the job site at all times during construction pursuant to OAC 4101:1-1-01. Inspections can be obtained from the Division of Construction Compliance by calling the dispatch center at least one day prior to the inspection. The dispatch phone number is (800) 822-3208. Once all inspections have been obtained a final Certificate of Occupancy will be issued pursuant to OAC 4101:1-1-01.

WORKSHEET FOR FEES TO BE PAID

Special Note: See attached instruction sheet regarding the allowed number of inspections covered under the fees listed below. Additional inspection fees will be required when the actual number of inspections exceeds the allowed number for each scope of work.

** Round up all lineal and square footage figures to the next 100 feet

BUILDING GENERAL FEES				
A. \$275.00 Processing Fee	\$			
B. \$10.50 per 100 Square Feet** (Ex. if 103 sq ft, round to 200 sq ft)	\$			
C. \$10.50 per 100 Lineal Feet** (See notes below, if 103 lineal ft, round to 200 lineal ft)	\$			
MECHANICAL FEES				
A. \$275.00 Processing Fee	\$			
B. \$6.50 per 100 Square Feet** (See notes below; if 103 sq ft, round to 200 sq ft)	\$			
ELECTRICAL FEES				
A. \$275.00 Processing Fee	\$			
B. \$6.50 per 100 Square Feet** (Ex. if 103 sq ft, round to 200 sq ft)	\$			
C. \$6.50 per 100 Lineal Feet** (See notes below, if 103 lineal ft, round to 200 lineal ft)	\$			
FIRE ALARM FEES (Fees do not inc	lude system acceptance s by fire officials)			
A. \$275.00 Processing Fee	\$			
B. \$6.50 per Alarm Device	\$			
SPRINKLER FEES (Fees do not include system acceptance tests/inspections by fire officials)				
A. \$275.00 Processing Fee	\$			
B. \$6.50 per 100 Square Feet** (Ex. if 103 sq ft, round to 200 sq ft)	\$			
INDUSTRIALIZED UNIT FEES				
A. \$200.00 Processing Fee	\$			
B. \$1.75 per 100 Square Feet** (Ex. if 103 sq ft, round to 200 sq ft. The Industrialized Unit fees are only required if you are placing an approved Board of Building Standards Industrialized Unit at a commercial or industrial site for the first time. Otherwise, ignore this fee box.)	\$			
CERTIFICATE OF USE AND OCCUPANCY FEE (108.8 OBC)	\$ 65.00			
SUB TOTAL	\$			
BOARD OF BUILDING STANDARDS (BBS) FEE	\$ 3.25			
TOTAL (transfer this amount to Total Fees to be Paid on the front side of this application)	\$			
Make fee check payable to: Treasurer, State of Ohio				

Fees are due when plans are submitted. If you have fee related questions when completing this worksheet, call 1-800-523-3581.

	OFFICIAL USE ONLY	
Additional Fees Due		\$
Refund Due		\$

Notes:

- Building general linear footage fee applies to fences and/or retaining walls, etc.
- Mechanical linear footage fee applies to projects containing only mechanical units or ductwork replacements or repairs where square footages are difficult to calculate. If the work is covered under the mechanical square footage fee calculation; no need to provide linear footage fee again.
- Electrical linear footage fee applies to projects containing only electrical units or conductor/conduit replacements or repairs where square footages are difficult to calculate. If the work is covered under the electrical square footage fee calculation; no need to provide linear footage fee again.

Work Sheet for Phased Plan Approval

1.	Project location and applicant information:				
	Building address:	County:			
	Designer: Phone				
	Address: Fax No	:			
	E-mail:				
2.	Check the type of work:				
	☐ New Construction ☐ Alterations ☐ Change of Occupancy	☐ Building Additions			
	Use group(s): Construction	n type:			
3. Phase of plan approval requested: (Please indicate all applicable phases you are requesting)					
	☐ Building footing and foundation:				
	 Site plan showing the location of the building in relation to the prope 	rty lines, public streets, and/or adjacent			
	buildings, o Building footing and foundation plan showing the depth, section, and	d all structural design data.			
	 Building floor plan showing the use occupancy and construction type 	e classification, building area, building			
height, number of story, means of egress, required fire rated wall locations, etc., Soil investigation report if required by section 1802 OBC.					
	 Special inspections statement for footing and foundation if required 	by section 1704 OBC.			
	☐ Building slab and perimeter insulation:				
	 All documents required for building footing and foundation phase, 				
	 Building slab and perimeter insulation details, Underground utilities including electrical, water, gas, sewer, and fire 	protection lines and construction details			
	 Building energy conservation reports per 1301 OBC for new building 				
	☐ Building shell:				
	 All documents required for building footing, foundation, and slab and 				
 Construction details for exterior wall, load bearing and non-load bearing walls, including the required resistance rating wall construction details, 					
	 Roof truss and/or floor truss shop drawings, 				
	 Roof construction details, Electrical service and wiring for exterior walls and required means or 	f egress lightings,			
	☐ Building interior partitions:	Landard			
	 All documents required for building footing, foundation, and slab and Construction details for all interior partitions including the required fi Electrical, plumbing, and/or mechanical drawings if the finishes of in 	re resistance rating wall construction details,			
	☐ Building systems:				
	 All documents required for building footing, foundation, and slab and 	perimeter insulation, and building shell,			
	and interior partitions,Construction drawings and details for building system such as elect	ical nlumbing mechanical fire protection			
	systems separately if desired.	ical, planioning, inechanical, ine protection			
	☐ Other type of phased approvals: Please attach additional sheet(s) to explain.			