

CITY OF DEER PARK
7777 Blue Ash Road, Deer Park, Ohio 45236
Phone 513-794-8860 Fax 513-794-8866
BUILDING/ZONING PERMIT APPLICATION

1. STREET ADDRESS: _____

2. ZONING: _____ OCCUPANCY: _____ PARCEL NUMBER: _____

3. Residential Property (RCO) Commercial Property (OBC)

	NAME	STREET ADDRESS	CITY	STATE	ZIP	PHONE
OWNER						
CONTRACTOR						
PLANS BY						

4. TYPE OF IMPROVEMENT

- | | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> New Building | <input type="checkbox"/> Garage | <input type="checkbox"/> Deck |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Hood System | <input type="checkbox"/> Pool (Above-Ground) |
| <input type="checkbox"/> Addition | <input type="checkbox"/> HVAC | <input type="checkbox"/> Pool (In-Ground) |
| <input type="checkbox"/> Repair/Replacement | ____Furnace ____Air Conditioner | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Change of Use | ____Commercial ____Residential | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Change of Occupancy | ____Replacement ____New | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Fire Alarm | ____Electric ____Gas ____Oil | <input type="checkbox"/> Wrecking/Moving |
| <input type="checkbox"/> Fire Suppression | | <input type="checkbox"/> Other (specify) |
| ____Sprinkler ____Hood | | _____ |

5. DESCRIPTION OF WORK: _____

6. COST Estimate cost of construction/improvement for which this application is being made: \$ _____

7. USE OF THIS BUILDING AND PREMISES:

Existing Use: _____ Proposed Use: _____

8. TOTAL FLOOR AREA FOR NEW BUILDINGS/GARAGES/SHEDS/ADDITIONS/DECKS: _____

The owner of this building and undersigned, do hereby covenant and agree with all the laws of the State of Ohio and the ordinances of the City of Deer Park pertaining to building(s), and to construct the proposed building(s) or structure(s) 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 to the best of their knowledge, true and correct.

Application by _____ Date _____
 Owner or Agent's Name (Print) (Sign)

DO NOT WRITE BELOW THIS LINE
(Office Use Only)

Permit Fee	\$ _____	
OBC 3% (Commercial)	\$ _____	
RCO 1% (Residential)	\$ _____	
Zoning Fee	\$ _____	
Total	\$ _____	Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card Receipt # _____

Plans Examiner Approval: _____ Date Plans Approved: _____

Building/Zoning Official Approval _____ Date Permit Issued _____

Acting As Agent. Authorized to Act for the Political Subdivision Building Permit Number _____