

**NOTICE: ARCHITECTURAL, ELECTRICAL, MECHANICAL, FIRE SUPPRESSION, FIRE ALARM, ETC. ALL REQUIRE A SEPARATE APPLICATION TO BE SUBMITTED AND WILL BE ISSUED A SEPARATE PERMIT NUMBER.** Building Use & Occupancy Classification, Construction Type, HVAC Permits, Property Address/Location, Project Description, Estimated Construction Cost, Moraine Property/Site Owner, Tenant, Contractor and Sub-Contractor sections must be completed upon submittal or application WILL NOT be accepted. **TWO SETS OF DETAILED DRAWINGS** must be submitted with this application along with a site plan. Contractor registration requirements must be met & both registration fees & permit fees must be paid at the time of submittal (please call the office before submitting to confirm what your permit fees will be).

**Applicant Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
*(Yes, I have read everything contained in this NOTICE Section and acknowledge what is needed to submit application for permit)*

**CONTRACTORS AND SUBCONTRACTORS** are required to complete a contractor registration that will be good for one (1) year. If your registration has expired, it will need to be renewed at the time of permit application submittal. The registration requires the following: \$40 processing fee (waived if the contractor is located in the City of Moraine), Certificate of Liability Insurance (City of Moraine listed as the certificate holder), Workers Comp Certificate. You must also complete the entire General/Sub Contractor section(s) of this application. **THERE IS NOT A SEPARATE APPLICATION FORM FOR THE REGISTRATION.** If you are only applying for the registration, you only need to complete the Contractor/Sub Contractor section(s) of this application. Thank you!

<b>Building Use &amp; Occupancy Classification</b> <small>(per 2007 Ohio Building Code) Please Circle One</small>						<b>Const. Type</b>  I A I B II A II B III A III B IV V A V B	<b>HVAC Permits</b>  Size of Unit  Ton's/BTU's  Furnace Type Standard High Efficiency	_____ <b>PROPERTY ADDRESS/LOCATION</b> ↑
Assembly      A-1    A-2    A-3    A-4    A-5 Business        B Educational     E Factory Industrial F-1    F-2 High Hazard     H-1    H-2    H-3    H-4    H-5 Institutional    I-1    I-2    I-3 Mercantile       M Residential      R-1    R-2    R-3    R-4 Storage          S-1    S-2 Utility/Misc.    U	<b>Project Description</b> (Include square footage of the <b>AFFECTED AREA</b> ) _____ _____ _____							
<b>Estimated Construction Cost (ECC) \$</b> _____ include all work for which <b>THIS</b> permit is issued including any permanent equipment.								

(Owner Name) \_\_\_\_\_  
 (Business Name) \_\_\_\_\_  
**MORaine PROPERTY/SITE OWNER** ↑ (per County Auditor)      Phone ↑  
 \_\_\_\_\_  
 Address ↑      City, State, Zip ↑  
 \_\_\_\_\_  
 Email ↑

(Contact Name) \_\_\_\_\_  
 (Business Name) \_\_\_\_\_  
**TENANT** ↑      Phone ↑  
 \_\_\_\_\_  
 Address ↑      City, State, Zip ↑  
 \_\_\_\_\_  
 Email ↑

(Contact Name) \_\_\_\_\_  
 (Business Name) \_\_\_\_\_  
**GENERAL CONTRACTOR** ↑ (see contractor notice above)      Phone ↑  
 \_\_\_\_\_  
 Address ↑      City, State, Zip ↑  
 \_\_\_\_\_  
 Email ↑  
 \_\_\_\_\_  
 REG-  
 Federal ID # ↑      City of Moraine Registration # ↑

(Contact Name) \_\_\_\_\_  
 (Business Name) \_\_\_\_\_  
**SUB-CONTRACTOR** ↑ (see sub-contractor notice above)      Phone ↑  
 \_\_\_\_\_  
 Address ↑      City, State, Zip ↑  
 \_\_\_\_\_  
 Email ↑  
 \_\_\_\_\_  
 REG-  
 Federal ID # ↑      City of Moraine Registration # ↑

**OFFICE USE ONLY-DO NOT COMPLETE**

City Lot # _____	Zoning District # _____	Variance Required _____	Yes No	Approved _____	Anthony B. Wenzler, Building & Zoning Administrator
\$ _____ Base Cost	\$ _____ Sq. Ft. Charge/Plan Review	\$ _____ Subtotal	\$ _____ 3% State Surcharge	\$ _____ TOTAL PERMIT FEES	
Application Date _____	Application # _____	Date Paid _____	Receipt # _____		
Permit Date _____	Permit # _____	Permit Closed _____	APPLICATION SCANNED	DRAWINGS SCANNED	
Emailed NIC-DATE _____	Emailed Applicant _____	PERMIT PICKED UP BY _____	DATE _____		