



CITY OF WYOMING
 800 OAK AVENUE
 WYOMING, OH 45215
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 customerservice@wyomingohio.gov

**APPLICATION FOR:
 RESIDENTIAL PLAN APPROVAL
 RESIDENTIAL BUILDING PERMIT
 ZONING CERTIFICATE**

DATE RECEIVED:
 (Office Use)

1. PROPERTY INFORMATION

Site Address:

Hamilton County Auditor's Parcel Number:

Historic Designation:
 Yes / No

Located in floodplain:
 Yes / No

2. IDENTIFICATION

Applicant: Owner Lessee Contractor Architect/Engineer Other (Describe):

A. Owner or Lessee

Name		Email	
Address		City	State Zip
Phone Number(s):	Office/Home	Mobile	

B. Contractor

Company Name		Contact Person	
Address		City	State Zip
Phone Number(s):	Office	Mobile	
Email:			

C. Architect or Engineer

Company Name		Contact Person	
Address		City	State Zip
Phone Number(s):	Office	Mobile	
Email:			

3. TYPE OF IMPROVEMENT (Select All That Apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Gazebo/Pergola | <input type="checkbox"/> Sign (Permanent) |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Grading/Drainage/Site Work | <input type="checkbox"/> Sign (Temporary) |
| <input type="checkbox"/> Alteration (Non-Structural) | <input type="checkbox"/> HVAC Equipment | <input type="checkbox"/> Solar Panels |
| <input type="checkbox"/> Alteration (Structural) | <input type="checkbox"/> New Principal Building | <input type="checkbox"/> Special Use |
| <input type="checkbox"/> Deck | <input type="checkbox"/> Patio | <input type="checkbox"/> Swimming Pool (Above & In-Ground) |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Retaining Wall | <input type="checkbox"/> Temporary Tent/Structure |
| <input type="checkbox"/> Driveway (Private) | <input type="checkbox"/> Roofing | <input type="checkbox"/> Window/Door Alterations |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Sidewalk (Private) | <input type="checkbox"/> Zoning Certificate (Commercial/Multi-Family Including Development Plans/Exemption) |
| <input type="checkbox"/> Other (Please Specify): | | |

4. PROPOSED USE

A. Residential

- Single-Family Residence Two-Family Residence Three-Family Residence
 Other (Please Specify):

B. Commercial/Multi-Family (Zoning Certificate Issued by City; Building Permit Issued by Hamilton County)

- | | | |
|--|--|---|
| <input type="checkbox"/> Antenna, Tanks, Towers | <input type="checkbox"/> Religious Assembly | <input type="checkbox"/> School, Library, other Educational |
| <input type="checkbox"/> Amusement, Recreational | <input type="checkbox"/> Office, Bank, Professional | <input type="checkbox"/> Service Station, Repair Garage |
| <input type="checkbox"/> Hospital, Institutional | <input type="checkbox"/> Public Utility (PAE Permit) | <input type="checkbox"/> Stores, Mercantile |
| <input type="checkbox"/> Multi-Family Residence (4 or More Units): Number of Units _____ | | |

5. BUILDING CHARACTERISTICS (For New Buildings & Additions)		
A. Dimensions		B. Number of Off-Street Parking Spaces
Number of Stories:		Enclosed:
Total Floor Area (SF):		Outdoor:
New Floor Area (SF):		C. Type of Sewage
New Volume (cu. ft.):		<input type="checkbox"/> Public
Land Disturbed (If 1 Acre or More):		<input type="checkbox"/> Private (Septic Tank, Etc.)
*If on a septic system, submit for Health Dept. evaluation		
E. Residential Buildings Only		
Number of Bedrooms:	Number of Full Baths:	Number of Partial Baths:
6. CONSTRUCTION DOCUMENT REQUIREMENTS		
Information required on construction documents includes the following: index, site plan, floor plans, exterior wall envelope, sections, structure, ratings, system descriptions, and accessibility provisions. Refer to RCO 106.1.3 (1-9) for specific document requirements.		
7. WORK DESCRIPTION		
8. ESTIMATED COST		
A. Cost (Not Including Trades Listed Below)		\$
B. Electrical		
C. Plumbing		
D. Heating, air conditioning		
E. Total Cost of Improvement (Add A-D)		\$
9. SIGNATURE		
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as their authorized agent and we agree to conform to all applicable laws of this jurisdiction:		
Printed Name of Applicant:		Application Date:
Signature of Applicant:		
10. VALIDATION (Office Use Only)		
Building Permit/Zoning Certificate Number:		Date Issued:
Fee:	\$	
Approved By:		
	Title	Title