



APPLICATION FOR COMMERCIAL PERMIT

CITY OF DEFIANCE
 BUILDING INSPECTION
 631 PERRY STREET SUITE 101
 DEFIANCE, OHIO 43512
 419-784-2195

RECPEIPT NO. _____ CHECK NO. _____ PERMIT NO. _____

1. SCOPE OF PROJECT	2. IS THIS PROJECT LOCATED IN A FLOOD PLAIN AREA? _____ YES _____ NO
STRUCTURAL	3. NATURE OF PROJECT _____ NEW _____ ALTERATION _____ ADDITION _____ CHANGE OF OCC.
MECHANICAL	4. TYPE OF CONSTRUCTION:
ELECTRICAL	5. CURRENT USE GROUP:
PLUMBING	6. PROPOSED USE GROUP:
SPRINKLERS	7. PROJECT DESCRIPTION:
FIRE ALARMS	
INDUSTRIALIZED UNIT	

8. NAME OF PROJECT:	
EXACT ADDRESS OF PROJECT:	
CITY:	ZIP:

9. OWNER OF PROJECT:	
ADDRESS:	
CITY:	STATE: _____ ZIP:
PHONE NO. :	

10. CONTRACTOR:	
ADDRESS:	
CITY:	STATE: _____ ZIP:
PHONE NO. :	CELL PHONE NO. :

11. COST OF WORK COVERED BY THIS APPLICATION:					
12. TOTAL NUMBER OF PLUMBING FIXTURES:					
13. TOTAL SQUARE FOOTAGE:	STRUC:	MECH:	ELEC:	IND. UNIT:	
14. TOTAL LINEAL FOOTAGE:	STRUC:	MECH:	ELEC:	IND. UNIT:	

15. SPRINKLER SQUARE FOOTAGE:					
16. NUMBER OF ALARM DEVICES:					
17. FEES PAID BY CASH:	CHECK:	CHECK NO. :			

I HEREBY CERTIFY THAT I AM THE (SELECT ONE) _____ OWNER _____ AGENT FOR THE OWNER AND THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE, AND THAT ALL OFFICIAL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO MY ATTENTION AT THE ADDRESS SHOWN ABOVE.

SIGNATURE _____
DATE

PRINT OR TYPE NAME OF SIGNER: _____

INSPECTOR _____
DATE