



VILLAGE OF ST. BERNARD

Department of Building & Planning
110 Washington Avenue
St. Bernard, OH 45217
513-242-7770 Fax: 513-641-1840
http://www.cityofstbernard.org

Permit Application Form

Permit Number

Part A - Identification COMPLETE IN INK PLEASE PRINT

Project Address Floor/Suite
Applicant: \*\*REQUIRED FIELD Street Address/City/State/Zip Phone: Email: \*\*REQUIRED FIELD
Contractor: Street Address/City/State/Zip Phone:
Contact Person: \*\*REQUIRED FIELD Street Address/City/State/Zip Phone: Email: \*\*REQUIRED FIELD

Part B - Main Use of Primary Building on Property: (Such as Office, One-Family, Parking Garage, Restaurant, etc.)

Present Use: No. of Dwelling Units:
Proposed Use: No. of Dwelling Units:

Part C - Type of Work

New Building Alteration (Description)
Addition Repair (Description)
Sprinklers Standpipes Fire Alarm (Associated Bldg. Permit #):
Evacuation/Fill Quantity of Fill Cubic Yards Borrow Site:
Quantity of Evacuation Cubic Yards Disposal Site:

Wrecking Dimension of Building width x length x # of stories
Depth of Basement Type of Wrecking Hand Machine

Signs - Does the message or copy pertain to a business conducted on the premises?
Type of Illumination? Ground Signs
Fence Height Length
Other (Explain)

HVAC Commercial Residential New Replacement
Heating Only Gas Electric Geothermal Oil Heat Pump
Cooling Only
Heating and Cooling (Please Check All That Apply)

Cost of Labor for this Application Only \$

(Do not include the cost of electrical work covered by a separate application)
The owner or agent of this building and undersigned does hereby certify that the information and statements give on the application, drawings, and inspections are to the best of their knowledge, true and correct.

REQUIRED:
Applicant' Signature

OFFICIAL USE ONLY BELOW LINE

Route To: Processing Fee: \$

APPROVALS:

Date Building Date

