



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

Owner: \*REQUIRED FIELD

Street Address/City/State/Zip

Phone:

Email:

Contractor:

Street Address/City/State/Zip

Phone:

Applicant/Contact: \*REQUIRED FIELD

Street Address/City/State/Zip

Phone:

Email:\*\*REQUIRED FIELD

Part B - Main Use of Primary Building on Property

Present Use Group:

Residential: [ ]

Commercial: [ ]

Proposed Use Group:

Part C - Type of Work

- [ ] New Building [ ] Alteration (Description)
[ ] Addition [ ] Repair (Description)
[ ] Sprinklers [ ] Standpipes [ ] Fire Alarm
[ ] Evacuation/Fill [ ] Revision - Associated Permit#:

[ ] Wrecking Dimension of Building width x length x # of stories

[ ] 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 Project (Labor and Materials) \$

(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 Date:

OFFICIAL USE ONLY BELOW LINE

Use Group Fee Due \$

APPROVALS:

Date: Date:

Building Official

Plans Examiner