



4480 Colorado Avenue  
Sheffield Village, Ohio 44054  
(440) 949-6209 (440) 949-5371 fax

**\*\*NEW INSPECTOR CONTACT INFORMATION\*\***

**Contractor Registration Information**

To register as a contractor in Sheffield Village,

- All contractor forms must be complete and signed by authorized signatory of company.
- Provide a Certificate of Liability Insurance:
  - Issued by a solvent insurance carrier licensed to engage in the business of insurance in the State of Ohio with minimum coverage of one hundred thousand dollars (\$100,000) for property damage, and three hundred fifty thousand dollars (\$350,000) for one (1) occurrence. Sheffield Village shall be named certificate holder for such policy.
- **Provide a copy of a completed Sheffield Village RITA Income Tax form 48. No exceptions will be permitted.**
- All outstanding fees shall be paid in full before registration is permitted.

The registration fee:

General contractor    \$125.00  
Subcontractor fee is    \$ 50.00

All plumbing, electrical, hvac, refrigeration or hydronics contractors must provide a copy of your state license at the time of registration. This applies to both residential and commercial contractors. Payments can be made in person with cash, check, credit card (Master Card, Visa, Discover) at the Building Department located at 4480 Colorado Ave. Hours are M-F 8:00 am to 4:00 pm. **If you request a hard copy of your payment receipt and registration certificate, enclose a self-addressed stamped envelope with your application.**

**General contractors must submit a complete list of subcontractors for each project to the Building Department. All subcontractors must be registered.**

**Occupancy permits *are not* issued unless all contractors and their subcontractors have been registered.**

## **Building Permit Procedures**

- **Residential:**
  - Single houses on an individual lot - a site plan including topography must be submitted to the Building Department and approved by the Village Engineer before a building permit will be issued.
  - Subdivisions - Consisting of more than one house more than one lot must follow Chapter 1109 of Village of Sheffield Codified Ordinances.
  - Building prints must be submitted on a CD in PDF format along with the hard copy and application.
  - The permit process may take up to 3 weeks.
- **Commercial:**
  - The proposed development or construction must comply with Chapter 1109 of the Village of Sheffield Codified Ordinances before permits will be considered.
  - For any new construction, alterations or additions, a copy of the building prints must be submitted on a CD in PDF format along with the hardcopies required and application.
  - The permit process may take up to 3 weeks.
- **Industrial:**
  - Follow Commercial Procedures.

## **Inspection Procedures**

- Requests for inspections involving any residential or commercial project must be submitted to the Building Department. A 24 hr notice for inspection is required prior to the requested inspection date. (24 hr notice does not include weekends or holidays).
- For inspections of floor elevation or final grade you must contact the Building Department at 440-949-6209 to schedule an appointment.
- It is the contractor's responsibility to contact the Building Department to schedule their individual inspections.

**All residential, commercial or industrial construction is subject to the following minimum inspections:**

- Sewer, water or street openings must be inspected before covering.
- Footers to be inspected before concrete.
- All underground plumbing, heating, electric, slabs, in-ground insulation, drainage systems, waterproofing, etc. shall be inspected before covering.
- Rough-in electrical, plumbing, mechanical and framing (structural or otherwise) shall be inspected before insulation is applied.
- Insulation inspection is required before any covering is installed.

**Additional inspections may be required for your project, contact the Building Department for a complete listing of required inspections.**

## Occupancy Permits

- Will not be issued until:
  - All fees are paid.
  - Final grade is approved.
  - Drives, sidewalks, parking areas or other site improvements are complete.
  - Utilities are complete and verified.
  - The address must be visible on the exterior of building or suite.
  - All final building inspections are complete including fire safety.

## Sheffield Village Utilities Department Requirements

- All water and sanitary sewer installations must meet the Sheffield Village specifications. The specifications are available at the Water Department.
- Call the Water/Sewer Department 24 hours in advance to schedule water tap installation, inspection, or to witness the pressure test before backfilling at 949-6210.
- Complete “as built” drawings specifying the location of any tap, manhole, shutoff, or any other device associated with the Utilities Department. Drawings must be submitted to the Water/Sewer Department before installation is approved, it must be on a CD in PDF format.
- Failure to comply with any of the regulations will result in rejection of installation and refusal of water/sanitary service.
- **Sanitary / storm water connections must be verified leak free. Pressure test is a minimum standard. All sanitary installations must pass minimum requirements. No occupancy permit will be issued without proper verification.**
- All development requiring storm water control measures must comply with the specifications required by the most recent MS4 permit for Sheffield Village. All regulations will be strictly enforced.
- All development must comply with the latest FEMA FIRM map available for the Village of Sheffield. All floodplain regulations will be strictly enforced.

### **CALL FOR AN INSPECTION BEFORE YOU COVER!**

Failure to request inspection by contractor will result in a stop work order.

All coverings must be removed to facilitate a proper inspection.

This includes footers, concrete, framing, drywall, or any other covering that may obscure a clear inspection.

**There will be no exceptions**

## DEPARTMENT LOCATION & TELEPHONE NUMBERS

Building Department, Service Department and Water Department  
4480 Colorado Avenue  
Sheffield Village OH 44054

Water Department	(440) 949-6210
Building Department	(440) 949-6209
Service Department	(440) 949-6209
Fax	(440) 949-5371

## INSPECTOR CONTACT INFORMATION

<b>Residential &amp; Commercial Building</b>	<b>Tom Horseman</b>	(440) 949-6209
<b>Plumbing</b> Residential & Commercial	<b>Tom Horseman</b>	(440) 949-6209
<b>Electrical</b> Residential & Commercial	Tim Golden	(440) 949-6209
<b>Water, Sewer, Streets &amp; Stormwater</b>	Ken Kaczay	(440) 949-6209
<b>Fire Prevention</b>	Greg Davis	(440) 949-6032

If you have any questions for the inspectors, please  
contact the Building Department at 440-949-6209 or [lesliee@sheffieldvillage.com](mailto:lesliee@sheffieldvillage.com)

## SHEFFIELD VILLAGE CLERK-TREASURER REPORTING REQUIREMENTS

- All contractors must submit **WEEKLY** manpower reports. Include manpower totals for your subcontractors as well. Daily numbers should reflect the total number of employees on site for each company daily, and the total number of all workers in total for that day.
- **Reports must be provided electronically to the following individuals:**

[clerktreasurer@sheffieldvillage.com](mailto:clerktreasurer@sheffieldvillage.com)

[mayorhunter@sheffieldvillage.com](mailto:mayorhunter@sheffieldvillage.com)

[lesliee@sheffieldvillage.com](mailto:lesliee@sheffieldvillage.com)

- Below is a sample of the manpower information to be provided:

DATE	DAY	COMPANY	COMPANY	COMPANY	DAILY TOTAL MANPOWER
		ABC Contractor	Sub- Contractor ABC	Sub- Contractor XYZ	
8/29/2014	Friday	11	26	5	42
8/30/2014	Saturday			5	5
8/31/2014	Sunday				0
9/1/2014	Monday	HOLIDAY	HOLIDAY	HOLIDAY	0
9/2/2014	Tuesday	8	29	0	37
9/3/2014	Wednesday	9	30	7	46
9/4/2014	Thursday	10	27	9	46
9/5/2014	Friday	15	27	3	45

Manpower totals must be submitted weekly!

**Failure to maintain reporting standards may result in  
suspension of occupancy permits or inspections**



## APPLICATION FOR REGISTRATION

Registering As (check one):

General Contractor, \$125

Sub-Contractor, \$50

PLEASE CHECK ANY OF THE FOLLOWING THAT REPRESENT THE TYPE OF WORK PERFORMED BY YOUR COMPANY.

ELECTRICAL  
 TREE SERVICE  
 PLUMBING/SEWER  
 LANDSCAPING  
 HVAC  
 STEEL ERECTION  
 FENCES  
 PAVING

CARPENTRY / FRAMING  
 CONCRETE / MASONRY  
 EXCAVATION  
 FIRE PROTECTION  
 ACCESSORY BUILDINGS  
 GLAZING  
 INSULATION  
 MECHANICAL

POOLS  
 ROOFING  
 SECURITY SYSTEMS  
 SIDING / WINDOWS  
 SIGNS  
 WATERPROOFING  
 OTHER: \_\_\_\_\_

**\*\*If you are a state certified contractor for plumbing, electric, hvac or hydronics, a copy of your state license must be submitted\*\***

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

DO YOU DO BUSINESS UNDER ANY OTHER NAME? IF SO, WHAT IS THE NAME: \_\_\_\_\_

PRESIDENT NAME or OWNER NAME: \_\_\_\_\_

FEDERAL TAX ID / SOCIAL SECURITY NUMBER: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_

E-MAIL: \_\_\_\_\_  check here if you would like your registration forms e- mailed next year

PROJECT LOCATION & NAME: \_\_\_\_\_

PROJECT GENERAL CONTRACTOR: \_\_\_\_\_

**BY SIGNING THIS DOCUMENT, I VERIFY THAT I HAVE RECEIVED THE INFORMATION REGARDING BUILDING DEPARTMENT REGULATIONS AND CLERK-TREASURER INCOME TAX REPORTING REQUIREMENTS.**

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_\_\_

2% INCOME TAX RATE

**FORM 48**

Regional Income Tax Agency  
Business Registration Form



800.860.7482  
TDD 440.526.5332  
ritaohio.com

SHEFFIELD VILLAGE #752

Municipality

**Business Type**

- Corporation
- S-Corp
- LLC
- Partnership
- Non-Profit
- Estate & Trust
- Sole Proprietor / LLC

**Reason for Registration**

- Courtesy withholding for an employee's resident municipality
- Doing business within the municipality this year (temporary)  
Approx. # of days \_\_\_\_\_ Start Date \_\_\_\_\_
- Business with a fixed location  
Date business began at this location \_\_\_\_\_

**Company Information (List physical address of work performed within this municipality)**

Name: \_\_\_\_\_ Federal ID #: \_\_\_\_\_  
 Address: \_\_\_\_\_ SSN: \_\_\_\_\_  
(required if sole proprietor)  
 City/State/Zip: \_\_\_\_\_  
 Mailing Address (for withholding tax forms / if different from above) \_\_\_\_\_  
 Mailing Address (for net profit tax forms / if different from above) \_\_\_\_\_

**\*Please note that your Federal Identification Number will serve as your RITA account number.**

**Filing Status:**

- Calendar year
- Fiscal year / month ending \_\_\_\_\_

Do you have any employees?  Yes  No

Number of employees at RITA location \_\_\_\_\_

My withholding is filed under a 3rd party account (PEO or common paymaster)  Yes  No  
If yes, list Federal ID # \_\_\_\_\_

Monthly gross payroll at RITA location \$ \_\_\_\_\_

I am a small employer (under \$500,000 in gross revenue during previous year)  Yes  No

**Contractors**

I am a contractor  Yes  No  
 Will you be using sub-contractors?  Yes  No  
 If yes, complete page 2.  
 Total contract amount of the project \$ \_\_\_\_\_

The Information Hereby Submitted is True and Correct.

Print Name \_\_\_\_\_ Title \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Please complete and sign this Registration Form and return within 10 business days. Please be advised that failure to timely register with RITA may result in delays in the processing of any required income tax filings or may result in future penalty and interest charges, if applicable. If you have any questions please contact the Registration Department at the number below.

Mail to: RITA  
ATTN: BUSINESS REGISTRATION  
P.O. BOX 477900  
BROADVIEW HEIGHTS, OH 44147-7900

ritaohio.com

Call: 800.860.7482, ext. 5008  
TDD: 440.526.5332  
Fax: 440.526.3136