



Sheffield Village Building Department
4480 Colorado Avenue - Sheffield Village, Ohio 44054
(440) 949-6209 Office (440) 949-5371 Fax

Date: _____

PERMIT APPROVED FOR:

Receipt #: _____

Full Building Permit

Cash: _____ Check: _____ Credit Card: _____

Partial Permit

APPLICATION FOR RESIDENTIAL PERMIT

New Home* Addition* Alteration Other(what you are doing)_____

*2 full sets of construction drawings and 1 PDF copy required for a new home / addition permit.

Total Square Feet for: House _____ Garage _____ Finished Basement _____

Job Site Address: _____ Permanent Parcel Number: _____

Sub Lot # _____ Subdivision Name: _____

CONTRACTOR	PROPERTY OWNER
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Phone: _____	Phone: _____
	Total Estimated Cost: _____
I hereby agree to the conditions of this Application for Residential Building Permit and to comply with ALL Codified Ordinances of Sheffield Village, and the law of the State of Ohio, relating to work done thereunder.	
_____ PROPERTY OWNER OR AGENT	_____ Date

The above **Application for Residential Building Permit** has been reviewed by the Building Official and/or Building Inspector and was:

Approved Approved with conditions Denied Other

Building Official

Date