

Today's Date: \_\_\_\_\_  Residential  Non-Residential

### Property Location:

Address: \_\_\_\_\_ Sublot: \_\_\_\_\_

Parcel #: \_\_\_\_\_ Subdivision: \_\_\_\_\_

### Property Owner Information:

Name of Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Project ID: \_\_\_\_\_

Total Fee: \_\_\_\_\_

Date Stamp: \_\_\_\_\_

### Contractor Information:

SAME AS ABOVE (Affidavit required if the homeowner is completing their own residential work)

Contractor Name: \_\_\_\_\_ Attention: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Cost/Valuation of Project: \_\_\_\_\_  New Construction  Addition  Alteration  Accessory Structure  
(Garage, Fence, Patio, Shed, Etc.)

Description of Work Covered Under This Application:

\_\_\_\_\_  
\_\_\_\_\_

Total Project Area: \_\_\_\_\_ Sq. Feet

Project Site Plans Attached:  Yes  No

Sub-Contractor List Attached:  Yes  No

### Certification & Signature:

I, \_\_\_\_\_ (\_\_\_\_\_) Signature Print Name

certify that I am the  Owner  Contractor  Architect  Other for the application and all information is true, accurate, and complete to the best of my knowledge. The acceptance of this permit, herein applied for, shall constitute an agreement on my part to abide by all codes, ordinances, regulations, and inspection requirements of the State of Ohio and the City of Twinsburg pertaining to the work listed. I further agree to correct any and all violations of such laws in a professional manner.

**Questions and inspection requests can be directed to 330-963-6270.**