

DELAWARE COUNTY
APPLICATION FOR COMMERCIAL PLAN APPROVAL AND BUILDING PERMIT

12/16/19

Date: _____

Permit Number _____

DESC/drainage permit #: * _____ Zoning Permit: * _____ Septic/SewerPermit #: * _____

***These must be provided at the time of application.**

Business Name: _____

Project Address: (as assigned by Map Department) _____

City/Village _____ Zip Code: _____ Township _____

Between: _____ and _____

Owner: _____ Phone Number (____) _____

Address _____ City, State _____ Zip _____

Architect/Designer/or Engineer: _____ Phone: Number (____) _____

Address _____ City, State _____ Zip _____

Contact Person: _____ Phone: Number (____) _____

Contractor: _____ Phone Number (____) _____

Address _____ City, State _____ Zip _____

Email _____

Site Contact: _____ Phone Number (____) _____

Email _____

Use Group (circle all that apply)

A1 A2 A3 A4 A5 B E F1 F2 H1 H2 H3 H4 H5 I1 I2 I3 I4 M R1 R2 R3 R4 S1 S2 U

Construction Type: (circle one) 1A 1B 2A 2B 3A 3B 4 5A 5B

Type of Work:

New _____ Addition _____ Foundation Only _____ Alteration _____ Shell _____ Tenant Finish _____

Demo _____ Moving _____ Temporary Structure _____ Tent _____ Other _____

Change of Use: From: _____ To: _____ **Mixed Use:** Separated: _____ Non-Separated: _____

Certificate of Occupancy Requested: Yes _____ No _____

Indicate Other Permits that may be required:

Type 1 Hoods: _____ Smoke Control: _____ HVAC: _____ Site Lighting: _____

Type 2 Hoods: _____ Fire Protection: _____ Refrigeration: _____ Signs: _____

Hood Suppression: _____ Underground Fire: _____ Electrical: _____ Swim. Pools: _____

Gas Line: _____ Fire Suppression: _____ Low Voltage: _____ Other: _____

Building Size:

Basement(s) _____ Sq. Ft. Garage _____ Sq. Ft. Tent: _____ Sq. Ft.

First Floor: _____ Sq. Ft. Patio: _____ Sq. Ft.

Second Floor: _____ Sq. Ft. Mezzanines: _____

Third Floor: _____ Sq. Ft. Deck(s): _____ Sq. Ft.

TOTAL: _____ Sq. Ft. **Area of Work:** _____ Sq. Ft. **Construction Cost:** \$ _____

