



THE CITY OF MEDINA APPLICATION FOR NON RESIDENTIAL PLAN APPROVAL

This form is also available at www.medinaoh.org. Submit one application per building or structure; all sections must be completed, See instruction sheet for details.

1 SCOPE OF PROJECT: (OBC 107.2.1) <input type="checkbox"/> Building General <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Mechanical <input type="checkbox"/> Fire Alarm <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing	2 TYPE OF PROJECT: <input type="checkbox"/> Repairs <input type="checkbox"/> New Building Construction <input type="checkbox"/> Alteration <input type="checkbox"/> Building Addition <input type="checkbox"/> Change of Occupancy <input type="checkbox"/> Request Existing Bldg C of O	3 PHASED PLAN REVIEW: <input type="checkbox"/> Foundation <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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4 APPLICATION RELATED INFORMATION:

- Is this project being submitted as a result of a previous preliminary plan review?
 No Yes, please provide the preliminary plan review number: _____

- Is this application being submitted as a result of a Notice of Violation or Adjudication Order that you received?
 No Yes, please provide the adjudication order number: _____

5 PROJECT/BUILDING LOCATION: (OBC 107.2.2)

Building Name _____ Street Address _____
 City/Township _____ Zip Code _____ County _____
 Directions _____

▪ Is this project/building located in a flood plain?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
▪ Has flood plain administrator been contacted for requirements?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

6 BRIEF DESCRIPTION OF THE SCOPE OF WORK COVERED UNDER THIS APPLICATION: (OBC 107.2.1)

7 BUILDING OWNER INFORMATION:

Name of owner _____ Attention: _____
 Street Address _____ City _____ State _____ Zip _____
 Phone No. _____ Fax _____ E-mail _____

8 APPLICANT INFORMATION: (Owner or designated representative) (OBC 107.2)

Applicant _____ Attention: _____
 Street Address _____ City _____ State _____ Zip _____
 Phone No. _____ Fax _____ E-mail _____

9 REGISTERED DESIGN PROFESSIONAL INFORMATION:

Certified Fire protection system designer (OBC 107.4.4)

Architect Engineer

Designer _____ Registration /Certificate No.: _____
 Street Address _____ City _____ State _____ Zip _____
 Phone No. _____ Fax _____ E-mail _____

10 BUILDING CODE INFORMATION:
 (Information applies to construction area in a mixed use groups building, or the entire building if a single use group building)

Current use group(s) _____ Current use group(s) _____ Current use group(s) _____
 Occupancy Description: _____

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11	GENERAL BUILDING INFORMATION: (The following information applies to the <i>entire building</i> , not just construction area.) (OBC 107.2.3.)	
Building Information: Use group(s)? _____ Mixed use groups? ___ No ___ Yes ___ Separated ___ Non-separated Construction type? _____ Building height (FT)? _____ No. of stories? _____ Occupant load? _____ Storage height (FT)? _____ Storage aisle width (FT)? _____		
List USE GROUP below for mixed use building.		List Occupancy Type for associated use group below.
_____		_____
_____		_____
_____		_____
_____		_____
Fire Protection Systems: (Enter the type of system such as NFPA 13, NFPA 72, etc., if known. Enter "N/A" if not applicable)		
Building sprinkler system? _____		Sprinkler demand @ base of riser (PSI)? _____
Limited area sprinkler system? _____		Type 1 hood suppression? _____
Building fire alarm system? _____		In-Rack sprinkler system? _____
_____		Smoke detection system? _____
12	CERTIFICATION: (OBC 107.2.5) I certify that I am the _____ Owner _____ Agent for the owner and all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above. Signature _____ Print Name: _____ Date _____	14
		THE AREA BELOW IS FOR OFFICIAL USE ONLY: Date received _____ Appl. No.: _____ Check No.: _____ Verification # _____ Processed by: _____ ___ Walk in ___ Mail in

"An Equal Opportunity Employer and Service Provider"

Notes:

This area is designated for the incorporation of fee schedules as established by the locally adopted fee schedule as indicated per Ohio Building Code Section 115.1.

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**DIRECTIONS FOR COMPLETING
THE CITY OF MEDINA APPLICATION FOR BUILDING PLAN APPROVAL**

In accordance with Ohio Administrative Code (OAC) Chapter 4101:1-1-01, pursuant to Ohio Revised Code (ORC) Section 3791.04, before beginning the construction, erection or manufacture of any building for which construction documents are required, the owner shall submit **(3)** copies of construction drawings to this division for approval. The construction documents shall be accompanied with the application form and attached (scope / fees) worksheets. The construction documents shall be prepared by a registered design professional pursuant to OAC 4101:1-1-01. An examination and inspection fee will be assessed at the time of submittal as outlined in OAC 4101:1-1-01.

Application Directions: Complete page one of the application and attached worksheets as outlined below. All boxes, 1 through 14, must be completed in full or the application will be returned. Send this completed form along with all required documents to: The City of Medina, 132 N. Elmwood Avenue, Medina, OH 44256.

1. **SCOPE OF PROJECT:** Check all the boxes that apply to the scope of work proposed in this project. Every scope of work checked must be accompanied with the appropriate fees. Without establishing the proper scope of work, the division will be unable to establish the inspection schedule for the project. Please note that **“Building General”** refers to **all “general trade” work** in the building including ceiling panels/grids, non-loadbearing partitions, flooring, etc.; NOT just structural loadbearing components of the building.
2. **TYPE OF PROJECT:** Check one of the types of projects from the list.
3. **PHASED PLAN REVIEW:** If you are applying for a phased plan approval, check all phases of the plan reviews that are applicable to this project. The plans examiner will review your plans according to the phased schedule. If you are not applying for a phased plan review, leave all boxes blank.
4. **APPLICATION RELATED INFORMATION:** Answer each of the questions in this block and provide additional information accordingly. Complete answers to the questions will help the division process and review the project accurately.
5. **PROJECT/BUILDING LOCATION:** Please provide complete information identifying the location of the building where the construction or renovation will occur. This will help the division determine the proper jurisdiction for the project.
6. **BRIEF DESCRIPTION OF THE SCOPE OF WORK COVERED UNDER THIS APPLICATION:** Please provide a brief description of the scope of work. Please include the names of the areas or rooms affected by the construction when only a portion of building is covered under the permit application. The description provided will be shown on your certificate of use and occupancy.
7. **BUILDING OWNER INFORMATION:** Please provide complete answers to each item. If the building is owned by a corporation, please provide the name of the corporation and identify a contact person in the section called “Attention.”.
8. **APPLICANT INFORMATION:** Provide complete information. All project correspondences will be directed to the project applicant.
9. **DESIGNER INFORMATION:** Section 106.2 of the Ohio Building Code requires that the design professional be identified including the design professional’s Ohio registration number.
10. **BUILDING CODE INFORMATION:** Information provided applies to the construction area in a mixed use groups building, or the entire building if it is a single use group building. For change of occupancy, the term “Current use group” refers to the approved use group under the previous occupancy. For information concerning the term “Proposed use group”, please refer to Chapters 3 and 6 of Ohio Building Code for the proper classification.
11. **GENERAL BUILDING INFORMATION:** The information provided applies to the entire building and is not limited to the construction area. Even when the proposed project is a partial building renovation or a building addition, the information for the entire building is required. The information provided will be shown on your certificate of use and occupancy in accordance with section 111 of the Ohio Building Code.
12. **APPLICATION FEES:** Please check one of the preferred payment methods and provide the square footage or linear footage of the areas affected by the construction. Please refer to the Fees Worksheet in this package for more details.
13. **CERTIFICATION:** The application cannot be processed if this section is not complete.
14. **OFFICE USE ONLY:** This section is reserved for our office use only. Please do not mark in this area.

*Once the plans have been examined and approved, a Certificate of Plan Approval will be issued to the owner along with two sets of construction documents. One of the sets of construction documents must remain at the job site at all times during construction pursuant to OAC 4101:1-1-01. Inspections can be obtained from the City of Medina, Building Department by calling the dispatch center at least one day prior to the inspection. The dispatch phone number is **330-722-9030** Once all inspections have been obtained a final Certificate of Occupancy will be issued pursuant to OAC 4101:1-1-01.*

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Work Sheet for Phased Plan Approval

1. Project location and applicant information:

Building address: _____ County: _____
Designer: _____ Phone No.: _____
Address: _____ Fax No: _____
_____ E-mail: _____

2. Check the type of work:

New Construction Alterations Change of Occupancy Building Additions

Use group(s): _____ Construction type: _____

3. Phase of plan approval requested: (Please indicate all applicable phases you are requesting)

Building footing and foundation:

- Site plan showing the location of the building in relation to the property lines, public streets, and/or adjacent buildings,
- Building footing and foundation plan showing the depth, section, and all structural design data,
- Building floor plan showing the use occupancy and construction type classification, building area, building height, number of story, means of egress, required fire rated wall locations, etc.,
- Soil investigation report if required by section 1802 OBC.
- Special inspections statement for footing and foundation if required by section 1704 OBC.

Building slab and perimeter insulation:

- All documents required for building footing and foundation phase,
- Building slab and perimeter insulation details,
- Underground utilities including electrical, water, gas, sewer, and fire protection lines and construction details,
- Building energy conservation reports per 1301 OBC for new building constructions,

Building shell:

- All documents required for building footing, foundation, and slab and perimeter insulation,
- Construction details for exterior wall, load bearing and non-load bearing walls, including the required fire resistance rating wall construction details,
- Roof truss and/or floor truss shop drawings,
- Roof construction details,
- Electrical service and wiring for exterior walls and required means of egress lightings,

Building interior partitions:

- All documents required for building footing, foundation, and slab and perimeter insulation, and building shell,
- Construction details for all interior partitions including the required fire resistance rating wall construction details,
- Electrical, plumbing, and/or mechanical drawings if the finishes of interior partitions are a part of the request.

Building systems:

- All documents required for building footing, foundation, and slab and perimeter insulation, and building shell, and interior partitions,
- Construction drawings and details for building system such as electrical, plumbing, mechanical, fire protection systems separately if desired.

Other type of phased approvals: Please attach additional sheet(s) to explain.