



• COMMERCIAL •
Application for Electrical Inspection, Heating & Ventilating
and Certificate of Plan Approval
 (Submit one application for each building or structure)
Wayne County Building Department
428 West Liberty Street • Wooster, Ohio 44691
330-287-5525

Permit No. _____

1. Owner's Name		7. Job Location Address	
Business Name		Location, Landmarks, etc.	
Street Address		City	Twp. Zip Code
City	Zip Code		
Phone No.		8. Submitters's Name	
		Street Address	
		City	Zip Code
		Phone No.	
		Fax No.	
		Email	
2. Plans Prepared By (check one)		9. Name of Person Drawing Plans	
<input type="checkbox"/> Ohio Registered Architect <input type="checkbox"/> Ohio Professional Engineer <input type="checkbox"/> Other		Street Address	
Ohio Registration No.		City	Zip Code
		Phone No.	
		Fax No.	
		Email	
3. Name of job and description of building - Store, Church, etc.		Signature of Applicant _____ Date _____	
CONTRACTOR			
PHONE			
General	#		
Elec.	#		
Heat.	#		
Sprink.	#		
Nature of Job			
Change of Occupancy <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> New <input type="checkbox"/>			
If addition, alteration, or change of occupancy, provide previous State Building Permit Number			
4. Type of Construction		5. To calculate Area	
1. <input type="checkbox"/> A <input type="checkbox"/> B 2. <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C 3. <input type="checkbox"/> A <input type="checkbox"/> B 4. <input type="checkbox"/> 5. <input type="checkbox"/> A <input type="checkbox"/> B OCCUPANT LOAD: _____		A. Measure to outside walls for dimensions. B. Include supported canopies as measured from the centerlines of the furthest columns or supports C. Do not include roofs or canopies which cantilever from building	
Check Appropriate Floor		Total Square Feet Per Floor	
A. Basement			
B. First Floor			
C. 2, 3, 4, 5, 6 (circle no.)			
D. Total Sq. Ft. A + B + C + D			
6. A. OBC Use Group Classification is:		Section No.	
A1 <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> M <input type="checkbox"/> H1 <input type="checkbox"/> H4 <input type="checkbox"/> F1 <input type="checkbox"/> I1 <input type="checkbox"/> I4 <input type="checkbox"/> R1 <input type="checkbox"/> S1 <input type="checkbox"/> U <input type="checkbox"/> A2 <input type="checkbox"/> A5 <input type="checkbox"/> H2 <input type="checkbox"/> H5 <input type="checkbox"/> F2 <input type="checkbox"/> I2 <input type="checkbox"/> R2 <input type="checkbox"/> S2 <input type="checkbox"/> A3 <input type="checkbox"/> E <input type="checkbox"/> H3 <input type="checkbox"/> I3 <input type="checkbox"/> R3 <input type="checkbox"/>			
B. If building is Use Group R1 or R2, specify number of units _____			
C. Estimated Construction Costs		Elec. Power Co.	
\$			
DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY			
		Plan Examiner	
		Approval Date	Make Checks Payable to: Wayne County Bldg. Dept. 428 West Liberty St. Wooster, Oh 44691
		Received By	
		Date Received	
		CAP	Zoning
Application Approved By _____ (CBO)			