



**• 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. \_\_\_\_\_

<b>1. Owner's Name</b>		<b>7. Job Location Address</b>	
Business Name		Location, Landmarks, etc.	
Street Address		City	Twp.                      Zip Code
City	Zip Code		
Phone No.		<b>8. Submitters's Name</b>	
		Street Address	
		City	Zip Code
		Phone No.	
		Fax No.	
		Email	
<b>2. Plans Prepared By</b> (check one)		<b>9. Name of Person Drawing Plans</b>	
<input type="checkbox"/> Ohio Registered Architect	Ohio Registration No.	Street Address	
<input type="checkbox"/> Ohio Professional Engineer		City	Zip Code
<input type="checkbox"/> Other		Phone No.	
		Fax No.	
<b>3. Name of job and description of building</b> - Store, Church, etc.		Email	
<b>CONTRACTOR</b>		<b>PHONE</b>	
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			
<b>4. Type of Construction</b>		<b>5. To calculate Area</b>	
1. <input type="checkbox"/> A <input type="checkbox"/> B		A. Measure to outside walls for dimensions.	
2. <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		B. Include supported canopies as measured from the centerlines of the furthest columns or supports	
3. <input type="checkbox"/> A <input type="checkbox"/> B		C. Do not include roofs or canopies which cantilever from building	
4. <input type="checkbox"/>			
5. <input type="checkbox"/> A <input type="checkbox"/> B			
OCCUPANT LOAD: _____			
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			
<b>6. A. OBC Use Group Classification is:</b>		<b>DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY</b>	
Section No. _____		Plan Examiner _____	
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"/>		Approval Date _____	<b>Make Checks Payable to:</b> Wayne County Bldg. Dept. 428 West Liberty St. Wooster, Oh 44691
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"/>		Received By _____	
A3 <input type="checkbox"/> E <input type="checkbox"/> H3 <input type="checkbox"/> I3 <input type="checkbox"/> R3 <input type="checkbox"/>		Date Received _____	
B. If building is Use Group R1 or R2, specify number of units _____		CAP _____	Zoning _____
C. Estimated Construction Costs \$ _____		Elec. Power Co. _____	
		Application Approved By _____ (CBO)	

<b>BUILDING FEES</b>	
<b>PERMIT #</b>	
\$110.00 per structure/alteration + \$.055 per sq ft	\$
\$65.00 minor building/alteration + \$.055 per sq ft	\$
<b>Total</b>	<b>\$</b>
<b>ELECTRIC FEES</b>	
<b>PERMIT #</b>	
\$110.00 per structure/alteration + \$.035 per sq ft	\$
\$65.00 minor building/alteration + \$.035 per sq ft	\$
\$55.00 service/change	\$
\$55.00 temp. pole	\$
<b>Total</b>	<b>\$</b>
<b>HEATING &amp; VENTILATING FEES</b>	
<b>PERMIT #</b>	
\$100.00 per structure/alteration + \$.035 per sq ft	\$
\$60.00 minor building/alteration + \$.035 per sq ft	\$
<b>Total</b>	<b>\$</b>
<b>SPRINKLER SYSTEM FEES</b>	
<b>PERMIT #</b>	
\$110.00 per structure/alteration + \$.045 per sq ft	\$
\$65.00 limited area sprinkler + \$.045 per sq ft	\$
<b>Total</b>	<b>\$</b>
<b>INDUSTRIALIZED UNITS</b>	
<b>PERMIT #</b>	
\$110.00 per structure + \$.035 per sq ft	\$
<b>Total</b>	<b>\$</b>
<b>FIRE PROTECTION SYSTEMS</b>	
<b>PERMIT #</b>	
\$110.00 per structure + \$.03 per sq ft	\$
\$65.00 minor/alteration + \$.03 per sq ft	\$
<b>Total</b>	<b>\$</b>
<b>CERTIFICATE OF OCCUPANCY</b>	
<b>PERMIT #</b>	
\$80	
<b>Total</b>	<b>\$</b>
<b>DEMOLITION</b>	
<b>PERMIT #</b>	
\$90.00 per building/structure	\$
<b>Total</b>	<b>\$</b>
Add 3% total fees (Ohio Board of Building Standards Fee)	Grand Total \$

<b>PLAN REVIEW FEES</b>	
\$80.00 per hour	\$
Initial review	\$
Resubmittals	\$
<b>Total</b>	<b>\$</b>
<b>RESUBMITTAL FEES</b>	
\$60.00 per document/submittal	\$
<b>Total</b>	<b>\$</b>