TRUMBULL COUNTY - OHIO

BUILDING INSPECTION DEPARTMENT

WARREN, OH 44481 PHONE: 330-675-2467

APPLICATION FOR RESIDENTIAL PLAN APPROVAL

1	**Scope of Project:** (Check if Included)			2	**City of Township**	
	NEW SFD		ABOVE GROUND POOL	3	**Is this project located within a city or village? _ _Yes __ _ No**	
	RESIDENTIAL ADD.		IN GROUND POOL	4	**Enter number of sheets in your drawing set _____**	
	GARAGE		FRONT PORCH / DECK			
	GARAGE ADD		REAR PORCH / DECK	5	**Parcel ID ___ ___ -- ___ ___ ___ ___ ___ ___**	
	SHED		3-SEASON ADD.			
	Other Explain					

6	Name of Project				
	Exact address of Project				
	City and Zip Code				
	Zoning Certificate Number:		Existing Sanitary connection (Check One)	Septic_____	Sewer_

7	Owner of Project	
	Attention: Full Name of Contact Person	
	Owner's address	
	City, State & Zip	
	Contact Information: Phone No.	
	Contact Information: E-Mail Account	

8	Submitter	
	Submitter's address	
	City, State & Zip	
	Contact Information: Phone No.	
	Contact Information: E-Mail Account	

9	Do You Prefer E-Mail Notification? _____	If you Check Yes, You may not have to come back. We will notify your e-mail account of permit fees so that you can mail a check. When revieved we will complete application process and PDF building permit to your e-mail account.

10 I hereby certify that I am the _ _Owner _ _ Agent of the Owner (Select one) and that 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

11	**Cost of Work Covered by this Application (Round to 1,000)**	**$**	Date Received

12	Official Use Only:	Application No:	Reviewed by:	
			Mail In:	Walk In:
			E-Mail By:	Date:

TRUMBULL COUNTY BUILDING INSPECTION

159 EAST MARKET STREET, SUITE 100
WARREN, OHIO 44481
Phone: 330-675-2467
Fax: 330-675-2862

MAIL-IN APPLICATION FOR PERMIT - ROOF

RCO 907 Re-Roofing:

The provisions of the Residential Code of Ohio (RCO Section 907 Reroofing shall apply. Materials and methods of application used for re-covering or replacing an existing roof covering shall comply with the requirements of RCO Chapter 9 Roof Assemblies.

PLEASE NOTE - Please attach to Application for plan approval
To be used when scope of work only involves roof replacement

Recovering Verses Replacement:

☐ **Removing Exist Roof**

☐ **Recovering over Exist Roof** - *New roof coverings shall not be installed without removing all existing layers of roof coverings where any of the following conditions exist:*

1 – Where the existing roof or roof covering is water soaked or has deteriorated to the point that the existing roof or roof covering is not adequate as a base for additional roofing.
2 – Where the existing roof coverings is wood shake, slate, clay, cement, or asbestos-cement tile.
3 – Where the existing roof has two or more applications of any type of roof covering.

Roof Area:

☐ **Complete Roof Replacement**
☐ **Partial Roof Replacement** ☐ Front ☐ Back ☐ Side

Total Area of Roof to be Replaced _____ SQ.

Proposed Roof Coverings:

Underlayment Proposed: ☐ 15# Roof Felt ☐ 30# Roof Felt ☐ Self-adhering Ice Barrier ☐ Other:

Roof Covering Proposed: ☐ Asphalt Shingles ☐ Clay and Concrete Tile ☐ Metal Roof Shingles ☐ Mineral Surfaced Roll Roofing ☐ Slate and Slate-type Shingles ☐ Wood Shingles ☐ Wood Shakes ☐ Built-up Roofs ☐ Metal Roof Panels ☐ Modified Bitumen Roofing ☐ Thermoset Single-ply Roofing ☐ Thermoplastic Single-ply Roofing ☐ Sprayed polyurethane Foam Roofing ☐ Liquid-applied Coatings

Permit Total Cost & Delivery:

Flat Fee -	$50.00
State of Ohio Assessment fee 1%-	$.50
Processing Fee-	$10.00
TOTAL PERMIT COST =	$60.50

Please include check or money order in amount above. Building permit will be processed and issued to Email account provided:

E-Mail_____

Submit by Email