

Village of Bellaire

3197 Belmont Street, Bellaire, OH 43906

740-676-6539

Application for Permit - Building and Signs

DATE ____/____/____

Permit Type Applied For: Building Demolition Sign Other _____

OWNER OF PROPERTY WHERE WORK IS BEING DONE (LAST NAME, FIRST NAME, MIDDLE INITIAL)

Address of Owner of Property _____

Best Phone _____

Other Phone _____

Address/Location of Where Work is done if different from Owner _____

Intended Use of Building or Site: _____

Description of Work for which application is sought _____

LIST THE FOLLOWING INFORMATION ON PERSON OR CONTRACTOR DOING ACTUAL WORK :

OWNER of Property Contractor Other relationship _____

NAME _____ DBA _____

Address _____

Best Phone _____ Other Phone _____ Contractor License Number _____

IMPORTANT INFORMATION READ THIS INFORMATION CAREFULLY !

I understand that this form is an application only and does not substitute for a permit. I understand that I may not proceed with work until I have a signed permit. I understand that I am responsible for compliance with all city, state and federal laws, codes, ordinances and business regulations. I understand that new construction or additions require a drawing of work with measurements (submit on separate sheet). Commercial Property requires a copy of State Blueprints. I am responsible for having variance if required, and may be responsible for liability insurance, worker compensation and city income tax. In signing this application, I am stating that under penalty for falsification, I believe that all information contained herein is true and accurate to the best of my knowledge and falsification is subject to civil and criminal penalties.

Signature of Applicant _____

Date _____

Comments/Modifications or Conditions _____

Fees Paid to City of Bellaire are:

For this Application: _____

For Contractor Permit: _____

Other Fees _____

Approved or Modified as listed _____

Not Approved _____

Inspector _____

Date _____

Inspector _____

Date _____

Review of Modified or Not Approved Application _____

NOTE- You may have certain rights to appeal actions-Consult Inspector

Inspector _____

Date _____

This is only an application and not a permit to perform work !

CONTRACTOR RESPONSIBLE FOR PROOF OF INSURANCE AND WORKER COMPENSATION