



**Building, Planning & Zoning Department**

28 East Main Street  
West Jefferson, Ohio 43162

Thomas A. Hale, Director  
Phone: 614-379-5246 Fax: 614-879-5326

**RESIDENTIAL BUILDING PLAN APPROVAL APPLICATION**

PLEASE PRINT OR TYPE

**1. PROJECT INFORMATION:**

Street Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Parcel No. \_\_\_\_\_  
 Project Description: \_\_\_\_\_  
 \_\_\_\_\_  
 Cost of Project \$ \_\_\_\_\_  
 Living Area (habitable space) (Sq. Ft.) \_\_\_\_\_  
 Non Living (garage, porch, decks) (Sq. Ft.) \_\_\_\_\_  
 #of Bedrooms (new dwelling only) \_\_\_\_\_ Fireplace  Yes  No  
 Crawl Space  Basement  Slab  
 Public Sewer  Public Water  Private Septic  Well  
 Unheated Space  Heated Space  
 FEMA Flood Area?  Yes  No

**2. PROPERTY OWNER**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_

**3. CONTRACTOR**

Company Name \_\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Cell \_\_\_\_\_  
 E-Mail \_\_\_\_\_

**DOCUMENTS INCLUDED THAT ARE INTENDED FOR REVIEW**

Building Plans  Electrical Plans  HVAC Plans  Energy Code  
 Phased Approval  Gas Line  Other \_\_\_\_\_

**PERMIT NUMBER \_\_\_\_\_**

**4. APPLICANT/PERSON RESPONSIBLE:**

Company Name \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 E-Mail \_\_\_\_\_

I hereby certify that I am the Owner of Record or that the proposed work is authorized by the Owner of Record, that I have been authorized by the Owner to make this application as his Agent, and that we agree to conform to ALL laws of the County and the State, and that all information on this application is truthful to the best of my knowledge. I also understand that **UPFRONT FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE**

Applicant Signature \_\_\_\_\_  
 Date \_\_\_\_\_

**OFFICE USE ONLY**

Intake Person \_\_\_\_\_  
 Upfront Fee Paid \$ \_\_\_\_\_  
 Plan Review Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 Plan Review Comments \_\_\_\_\_  
 Balance Due \$ \_\_\_\_\_  
 Notified Permit Ready \_\_\_\_\_ Date \_\_\_\_\_  
 Date Picked Up \_\_\_\_\_

## INSTRUCTION AND GENERAL NOTES

1. Numbers 1 – 4 must be filled out completely. This application will not be accepted without all necessary information as indicated.
2. Zoning Certificate/Approval if applicable.
3. Two sets of the specifications and plans shall be submitted.
4. Construction plans must contain the minimum information per RCO 106.
5. Filing of an application for plan approval does not constitute permission to proceed with work.
6. The approval of documents is invalid if construction, erection, alteration, or other work has not commenced within twelve months. RCO 105.3.
7. Once the application is approved the staff will call the applicant indicating approval and balance of permit cost.
8. Inspections may be requested no later than 3:30 pm the day before the date of the inspection. The phone number is 614-379-5246 or 614-379-5250. Office Hours: Monday-Friday 7:30 am - 4:30 pm closed from 12:00 to 1:00.

**NOTE: FAILURE TO SUBMIT PLANS THAT CONFORM TO THE ABOVE WILL RESULT IN ADJUDICATION OF THE PLANS AND APPLICATION. A PLAN APPROVAL WILL NOT BE ISSUED UNTIL PLANS ARE IN COMPLIANCE WITH THE ABOVE.**

**Application will not be accepted unless signed and dated.**

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## **Contact Information:**

The Village of West Jefferson  
Building, Planning and Zoning Department  
28 East Main Street  
West Jefferson, Ohio 43162  
(614) 379-5246 or (614) 379-5250  
(614) 879-5326 fax

### **Office Hours**

7:30 am to 4:00 pm  
12:00 - 1:00 closed  
Monday through Friday

Thomas A. Hale, CBO, RBO  
thale@westjeffersonohio.gov  
Website: [www.westjeffersonohio.gov](http://www.westjeffersonohio.gov)