City of Garfield Hts. Building Department

5407 Turney Rd.
Garfield Hts., Ohio 44125
216-475-3835
Fax: 216-475-6081

Application for residential miscellaneous permit.

Property Information	Type of Permit Requested
Address of Project _____ PP Number _____ S/L Number _____	○ Building ○ Concrete ○ Electrical ○ HVAC ○ Plumbing ○ Sewer ○ Other _____
Applicant/Contractor	General Information
Print Name _____ Address _____ _____ Phone Number _____ Email Address _____	Lot Size _____ Estimated Value _____ Description of Project _____ _____ _____ _____ _____ _____ _____ _____ _____
Property Owner	
Name _____ Address _____ _____ Phone Number _____ Email Address _____	Fixtures # _____ Outlets # _____ Linear Ft. _____ Square Ft. _____ _____ _____
Contractor	
Name of Contractor _____ Registration Number _____ Expires _____	Note: Attach required drawing on separate sheet

THIS PROPOSED PROJECT COMPLIES WITH ALL DEED RESTRICTIONS: _____ YES

Signature of applicant _____ Date _____

Approved ☐ Denied ☐

Building Commissioner _____ Date _____

Permit Number _____ Application Number _____ Receipt Number _____

www.garfieldhts.org

M:\Interoffice Documents\Forms and Permit Apps\Residential Misc Permit17.doc