



City of Hilliard, Building Department, 3800 Municipal Way, Hilliard, Ohio 43026
 Phone: 614.334.2557 Fax: 614.529.6017 www.cityofhilliard.com

Application for Miscellaneous Permit



CHECK

TYPE OF PERMIT	FEE	INSPECTIONS (see chart)	REQUIRED ATTACHMENTS
Sidewalk – New	\$5	1 & 2	Permit Application / Surveyor's Plot Plan (draw outline) / Proposed Drawing (3)
Sidewalk – Exact Replacement	\$5	1 & 2	Permit Application
Shed (less than 140 sq. ft.)	\$5	1,3,4,5 & 6	Permit Application/Surveyor's Plot Plan (draw outline)/Zoning Application /Proposed Drawing (3)
Gas Line	\$0	1,7 & 8	Permit Application (not currently in effect - Expected to be in May 2007 - price will be \$75)
Driveway (concrete not asphalt)	\$5	1 & 2	Permit Application / Surveyor's Plot Plan / Proposed Drawing (3)
Approach - Alteration	\$5	1 & 2	Permit Application / Surveyor's Plot Plan / Proposed Drawing (3)
Approach - Exact Replacement	\$5	1 & 2	Permit Application
Driveway & Approach	\$5	1 & 2	Permit Application / Surveyor's Plot Plan / Proposed Drawing (3)
Parking Lot-commercial	\$20	1 & 6	Permit Application / Surveyor's Plot Plan / Zoning Application / Proposed Drawing (4)
Antenna / Satellite Dish	\$25	1 & 6	Permit Application / Surveyor's Plot Plan / Zoning Application / Property Addresses w/ 200 ft.
Portable Storage Unit-Residential	\$0	1	Permit Application / Letter specifying dates of use, size of unit (max. 160 sqft) and placement.
Portable Storage Unit-Commercial	\$0	1	Permit Application / Letter specifying dates of use, size of unit (max. 192 sqft) and placement.
Deck	\$0	1,3,4&6	Permit Application / Surveyor's Plot Plan / Proposed Drawing (3) / Specify deck height: _____ Route: MM / JT / LML

Cash (exact change), Check or Credit Card (Visa& MC) payment accepted

Application for Miscellaneous Permit

Job Site Address: _____

Contractor: _____

Contractor Registration # (Hilliard): _____

Owner's Name: _____

REQUIRED INSPECTIONS	
(match to chart above)	
1	Plan Review
2	Pre-Pour Inspection
3	Footer Inspection
4	Framing Inspection
5	Mechanical Inspections (HVAC, Elec. & Plumb permitted separately)
6	Final Inspection
7	Rough Install Inspection
8	Pressure Test

Lot # / Subdivision: _____

Contractor Address: _____

Contractor's Phone: _____

Owner's Phone: _____

Homeowner's wishing to do the above work themselves must complete a Homeowner's Affidavit

Applicants Signature REQUIRED

In consideration given, the applicant agrees to install said work in all respects in compliance with the laws of the state of Ohio and the ordinances of the City of Hilliard, Ohio.

Applicant's Signature _____ Date _____

Permit granted by: _____
 (becomes permit with valid signature)

Ron Fletch, Building Inspector

Date

Permit Number: _____

Inspection Line: 614.334.2558