

# CHAMPAIGN COUNTY BUILDING REGULATIONS

# COMMERCIAL PLAN APPROVAL APPLICATION

PLEASE FILL OUT COMPLETELY. OMISSIONS MAY DELAY PERMIT PROCESS.

Application No. \_\_\_\_\_

## (1) Project Information

Name of Business: \_\_\_\_\_  
Site Address: \_\_\_\_\_  
City: \_\_\_\_\_

## (2) Project Description

\_\_\_\_\_  
\_\_\_\_\_

(3) Square Footage \_\_\_\_\_

Proposed Use Code \_\_\_\_\_

## (4) Property Owner

Owner/Representative: \_\_\_\_\_  
Address: \_\_\_\_\_  
(if different from site address)  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

## (5) Responsible Design Professional

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Mobile/Cell/Pager \_\_\_\_\_

## (6) Contractor Information

Company Name \_\_\_\_\_  
Contact Name \_\_\_\_\_

Company Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Mobile/Cell/Pager \_\_\_\_\_

Value of work \$ \_\_\_\_\_

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and that we agree to conform to all applicable laws of the County, City, Village and State.

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

Applicant Title \_\_\_\_\_

Date \_\_\_\_\_

Phone/Cell/Pager \_\_\_\_\_

## (7) Type of Approval

### Building

- Footer/Foundation  Building Shell Only  New Building  
 Temp Structure  Alt/ Renovation  Cell Tower  
 Addition  Cert Occupancy  Other \_\_\_\_\_

### Electrical

- Service Upgrade  New Wiring/Alterations  
 New Complete  Temporary Pole  
 New Alarm System  Alarm Alteration

### HVAC/Gas Line/Refrigeration

- New HVAC System  Duct Alteration  Exhaust (Hood)  
 Bldg Service Piping  Unit Replacement  New Gas Piping  
 Gas Piping Repair  Gas Piping Extension

### Fire Suppression

- New System  Alteration  Hood Suppression

**ALL ITEMS CHECKED MUST BE INCLUDED ON THE CONSTRUCTION DOCUMENTS SUBMITTED WITH THIS APPLICATION IN ORDER TO BE APPROVED FOR THIS PLAN APPROVAL.**

## Preliminary Plan Approval

Yes \_\_\_\_\_ No \_\_\_\_\_

## DEPARTMENT USE ONLY

### Certificate of Plan Approval (Plans Examiner Use)

Plans examiner approval \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

CBO approval \_\_\_\_\_

Comments \_\_\_\_\_

Special Instructions/Comments \_\_\_\_\_

Zoning Required Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

Return Plans Yes \_\_\_\_\_ No \_\_\_\_\_

Project Fee \$ \_\_\_\_\_ 3% \$ \_\_\_\_\_

## INSTRUCTIONS

**Issuance of a certificate of plan approval does not authorize the start of construction. A permit to start construction must be purchased, and the Building Official must grant permission to build, install, or construct this project.**

**HVAC, Electrical, Mechanical, Gas Piping, and Refrigeration Contractors must be state licensed and registered with Champaign County in order to purchase a permit to install these systems.**

1. This application will not be accepted without all necessary information as indicated.
2. Zoning approval when required.
3. Site approval from Champaign Health District or Ohio EPA must be submitted for new structures or additions.
4. Four sets of the specifications and plans shall be submitted. A601.1
5. Filing an application for permit does not constitute permission to proceed with work. A401.1
6. Person primarily responsible: the design professional for building construction shall be responsible for the coordination of all ancillary documents including subsequent specifications and reports, electrical, plumbing, HVAC, gas lines and fire protection.
7. Application is invalid six (6) months from the date of same if permit has not been secured. A401.1.3
8. The approval of documents is invalid if construction, erection, alteration, or other work has been commenced within twelve (12) months.
9. The Building Official shall be notified of inspection not less than twenty-four (24) hours in advance.

### **Contact Information:**

Champaign Co. Building Regulations  
1512 S. US Hwy 68 Bay 13  
Urbana, OH 43078  
937-484-1602  
937-484-1591 fax

Dana R. Booghier, CBO, Director  
Phyllis J. Rittenhouse, Office Administrator  
[prittenhouse@co.champaign.oh.us](mailto:prittenhouse@co.champaign.oh.us)

### **Office Hours:**

8:00am to 4:00pm Monday through Friday

### **Inspection Scheduling:**

8:00am to 3:00pm