

CHAMPAIGN COUNTY BUILDING REGULATIONS

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/Cell _____

(5) Responsible Design Professional

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone/Cell _____

Email: _____

(6) Contractor Information

Company Name _____

Contact Name _____

Company Address _____

City _____ State _____ Zip _____

Phone/Cell _____

Email _____

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 _____

COMMERCIAL PLAN APPROVAL APPLICATION

(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
Michele Hall, Office Administrator
mhall@co.champaign.oh.us

Office Hours:

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

Inspection Scheduling:

8:00am to 3:00pm