



# CITY OF MAYFIELD HEIGHTS – BUILDING DEPARTMENT

6154 Mayfield Road, Mayfield Heights, OH 44124

Phone: 440-442-2626, ext. 210 Fax: 440-442-7662

## COMMERCIAL PLANS APPROVAL/BUILDING PERMIT APPLICATION

**\*\*PLEASE NOTE NEW SUBMITTAL REQUIREMENTS AS OF JUNE 2022\*\***

### **SUBMITTAL REQUIREMENTS - DEPOSIT**

A \$500.00 minimum plan review deposit is required *at the time of submittal*. \*Cash or check made payable to the City of Mayfield Heights. PERMIT FEES **WILL NOT** BE TAKEN FROM DEPOSITS. The unused portion will be returned to the applicant after plans are approved. Any additional fees will be charged to the applicant.

- **PDF** of the plans and specs should be emailed to [monicaferrante@mayfieldheights.org](mailto:monicaferrante@mayfieldheights.org).
- **Paper copies are no longer required at submittal, but may be requested at a later date.**

**EXTERIOR ALTERATIONS/ADDITIONS** are subject to approval by the Architectural Board of Review.

### **PERMIT FEES**

#### **BUILDING PERMITS:**

Alterations/Additions (500 sq. ft. or more):

\$500.00 *plus* \$5.00 for each \$1,000 **or fraction of** estimated cost of construction (plus 3%)

Alterations/Additions (less than 500 sq. ft.):

\$250.00 *plus* \$5.00 for each \$1,000 **or fraction of** estimated cost of construction (plus 3%)

New Construction:

Base Fee: {up to 10,000 sq. ft. = \$1,000} {10,001-20,000 sq. ft. = \$2,000} {20,001/+ sq. ft. = \$3,000}  
*plus* \$5.00 for each 100 square feet **or fraction of** floor area. (plus 3%)

\*Fees for sub-trades, fire alarms, and fire protection are not included in building permit fees.

#### **FIRE ALARM PERMITS:**

*New:* \$206.00 (including 3%)

*Upgrade/Alteration/Addition:* \$103.00 (including 3%)

#### **FIRE PROTECTION PERMITS:** (sprinklers & hood suppression)

\$100.00 + \$5.00 per head (plus 3%)

**HOOD – With Fire Suppression:** \$100.00 + \$5.00 per head (plus 3%)

**HOOD – Without Fire Suppression:** \$103.00 (including 3%)

\*Permit payments are accepted in cash, check made payable to The City of Mayfield Heights or credit card.

\*Permit fees will not be taken from plan review deposits.



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**APPLICATION FOR COMMERCIAL PLANS APPROVAL/BUILDING PERMIT**

|                        |           |        |                                    |
|------------------------|-----------|--------|------------------------------------|
| <b>JOB ADDRESS:</b>    |           |        |                                    |
| <b>JOB NAME:</b>       |           |        |                                    |
| Bldg. No:              | Suite No: | Floor: | Bldg. Descr. (store, church, etc): |
| <b>PROPERTY OWNER:</b> |           |        |                                    |
| OWNER'S ADDRESS:       |           |        |                                    |
| CITY, STATE, ZIP:      |           |        | PHONE:                             |

| SCOPE OF PROJECT:        |   | TYPE OF PROJECT          |                              |
|--------------------------|---|--------------------------|------------------------------|
| <input type="checkbox"/> | Building General (New/Addition/Alterations) | <input type="checkbox"/> | New Construction             |
| <input type="checkbox"/> | Mechanical (HVAC/Electrical/Plumbing)       | <input type="checkbox"/> | Building Addition            |
| <input type="checkbox"/> | Sprinkler System                            | <input type="checkbox"/> | Building Repairs/Alterations |
| <input type="checkbox"/> | Fire Alarm                                  | <input type="checkbox"/> | Change of Occupancy/Use      |

|                              |  |
|------------------------------|--|
| <b>TOTAL SQUARE FOOTAGE:</b> |  |
| Basement:                    |  |
| First Floor:                 |  |
| Additional Floors:           |  |
| Total Square Footage:        |  |

| FIRE PROTECTION SYSTEMS TYPE: |                        |                          |                 |
|-------------------------------|------------------------|--------------------------|-----------------|
| <input type="checkbox"/>      | Building Sprinkler     | <input type="checkbox"/> | Smoke Detection |
| <input type="checkbox"/>      | Limited Area Sprinkler | <input type="checkbox"/> | Fire Detection  |
| <input type="checkbox"/>      | Building Fire Alarm    | <input type="checkbox"/> | N/A             |
| <input type="checkbox"/>      | Hood Suppression       | <input type="checkbox"/> | Other:          |

| PROPOSED OBBC USE GROUP CLASSIFICATION:  |     |                          |     |                          |     |                          |     |                          |     |                          |     |                          |     |                          |     |
|--|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input type="checkbox"/>   | A-1 | <input type="checkbox"/> | A-4 | <input type="checkbox"/> | E   | <input type="checkbox"/> | H-1 | <input type="checkbox"/> | H-4 | <input type="checkbox"/> | I-3 | <input type="checkbox"/> | R-1 | <input type="checkbox"/> | R-4 |
| <input type="checkbox"/>   | A-2 | <input type="checkbox"/> | A-5 | <input type="checkbox"/> | F-1 | <input type="checkbox"/> | H-2 | <input type="checkbox"/> | I-1 | <input type="checkbox"/> | I-4 | <input type="checkbox"/> | R-2 | <input type="checkbox"/> | S-1 |
| <input type="checkbox"/>   | A-3 | <input type="checkbox"/> | B   | <input type="checkbox"/> | F-2 | <input type="checkbox"/> | H-3 | <input type="checkbox"/> | I-2 | <input type="checkbox"/> | M   | <input type="checkbox"/> | R-3 | <input type="checkbox"/> | S-2 |
| U Mixed use groups? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Separated <input type="checkbox"/> Non-separated |     |                          |     |                          |     |                          |     |                          |     |                          |     |                          |     |                          |     |

| CONSTRUCTION TYPE:       |    |                          |    |                          |    |                          |    |                          |    |
|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input type="checkbox"/> | 1  | <input type="checkbox"/> | 2A | <input type="checkbox"/> | 3A | <input type="checkbox"/> | 4  | <input type="checkbox"/> | 5B |
| <input type="checkbox"/> | 1B | <input type="checkbox"/> | 2B | <input type="checkbox"/> | 3B | <input type="checkbox"/> | 5A | <input type="checkbox"/> |    |

Included with my submittal is energy code compliance. (not required for fire submittals)

Building Permit No: \_\_\_\_\_

Date Issued: \_\_\_\_\_

**JOB DESCRIPTION:**

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

**Project for:** \_\_\_ new occupant \_\_\_ existing occupant \_\_\_ vacant space other: \_\_\_\_\_

**Estimated Cost of Construction:** \_\_\_\_\_

**FIRE ALARM SUBMITTAL:** Total # of Devices: \_\_\_\_\_

**FIRE PROTECTION SUBMITTAL:** Total Number of Heads: \_\_\_\_\_

**REGISTERED DESIGN PROFESSIONAL:**

Architect: Ohio Registration No: \_\_\_\_\_

Engineer: Ohio Registration No: \_\_\_\_\_

Certified Fire Protection System Designer: Ohio Registration No: \_\_\_\_\_

COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS (***MUST BE PROVIDED***): \_\_\_\_\_

**CONTRACTOR:**  to be determined

COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**APPLICANT:**

COMPANY: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

The acceptance of the permit herein applied for shall constitute an agreement on the part of the applicant to abide by all the conditions herein contained and to comply with all the ordinances of the City of Mayfield Heights and the laws of Ohio relating to the work to be done hereunder; and said agreement is a condition of said permit.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_