

**COMMERCIAL PROPERTY INFORMATION FORM**

Village of Chagrin Falls Zoning Department

Phone: (440) 247-5050

Email: building@chagrin-falls.org

(office use) VCF N/C t# \_\_\_\_\_

**A. Property owner & Tenant information:**

Date of application: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Address: \_\_\_\_\_

Phone # \_\_\_\_\_ email: \_\_\_\_\_

Occupant / Tenant: \_\_\_\_\_ Ph# : \_\_\_\_\_ email: \_\_\_\_\_

Address or suite no. where work is taking place: \_\_\_\_\_

Scope of work: \_\_\_\_\_ Est. Cost of construction \$ \_\_\_\_\_

**B. Contractor Information:**

**Contractors must be registered with the Village of Chagrin Falls**

General Contractor: \_\_\_\_\_ Ph # \_\_\_\_\_ email: \_\_\_\_\_

Mechanical (HVAC) Contractor: \_\_\_\_\_ Ph #: \_\_\_\_\_ email: \_\_\_\_\_

Plumbing Permit: Contractor: \_\_\_\_\_ Ph #: \_\_\_\_\_ email: \_\_\_\_\_

Electrical permit: Contractor: \_\_\_\_\_ Ph #: \_\_\_\_\_ email: \_\_\_\_\_

OTHER: Contractor: \_\_\_\_\_ Ph #: \_\_\_\_\_

**B. Commercial Permit Information:**

Any construction work being performed it is the owner, or owner representative responsibility to contact the Department of Industrial compliance at 1-800-523-3581, to ascertain whether they will require permits for; structural, electrical, mechanical, permits.

For plumbing contact the Cuyahoga County Board of Health 216-201-2000,

Regardless a zoning occupancy permit will need to be applied for and approved for new uses and / or change of use prior to applying to the state or county permits.

Complete the section below and return it to the Village of Chagrin Falls Zoning Department.

I \_\_\_\_\_ representing: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

have contacted the above agencies in regards to obtaining permits for the following

Structural  Mechanical  Electrical  Other: \_\_\_\_\_

Name of the person that you spoke to from Division of Industrial Compliance and it has been deemed that no permits will be necessary for the project mentioned above. Name; \_\_\_\_\_ Phone # \_\_\_\_\_ Date: \_\_\_\_\_

I have also contacted the County Board of Health for,  plumbing permit, and it also has been deemed that no plumbing permit is necessary for the project mentioned above. Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Date: \_\_\_\_\_

**If permits deemed to be required please submit a copy of your approved plans for fire prevention & zoning approval to the village zoning department prior to starting work.**

**Dumpster Information:** Will a dumpster be required for job? \_\_\_\_\_ Date of placement: \_\_\_\_\_ Date removed: \_\_\_\_\_.

where will dumpster be placed:  public property,  private property. Size of dumpster: \_\_\_\_\_ yd.

If on public property, you will need to ascertain permission from the police department. Please indicate whom you spoke

with: \_\_\_\_\_ A misc. permit will be required for dumpster placed in public right of way: \$20.00 + \$1000 cash bond will be required. It is the applicants responsibility to provide

I further acknowledge that I am aware that failure to obtain proper permits and the registering of all contractors with the Village will result in administrative action by the village of Chagrin Falls.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

updated 11/2015