



CITY OF BROOKLYN

7619 Memphis Avenue, Brooklyn, OH 44144
Phone 216-351-2133 Fax 216-351-5800

PERMIT _____
APP. # _____

BUILDING PERMIT

APPLICATION TYPE: <input type="checkbox"/> BUILDING <input type="checkbox"/> DEMOLITION <input type="checkbox"/> SIGN <input type="checkbox"/> HVAC
<input type="checkbox"/> FIRE PROTECTION SYSTEM <input type="checkbox"/> OTHER: _____

SITE ADDRESS _____

PROPERTY OWNER NAME _____ PHONE # _____

OWNER ADDRESS IF DIFFERENT _____

CONTRACTOR COMPANY NAME _____

COMPANY ADDRESS _____

PHONE # _____ EMAIL _____

PROJECT COST: \$ _____ SQ. FOOTAGE _____

PROPOSED WORK TO BE PERFORMED (ALL WORK PER LOCAL AND STATE CODES):

PRESENT USE: Commercial or Residential

APPLICANT NAME: _____

SIGNATURE: _____

***** DO NOT WRITE BELOW THIS LINE *****

CITY FEE	\$
STATE 1%	
OR 3% FEE	\$
DEPOSIT	\$
TOTAL	\$

- Zoning Variance Required
- Planning Commission Approval Required
- Site Plan Approval Required
- Requires Building Commissioner Approval
- Other Permits Required

ADDITIONAL COMMENTS: _____

Approved By: _____ Date: ___/___/___