

*NA	PLAN REVIEW \$
CITY FEE	\$
STATE 1% OR 3% FEE	\$
DEPOSIT	\$
TOTAL	\$

CITY OF BROOKLYN
7619 Memphis Avenue, Brooklyn, OH 44144

PERMIT _____ -- _____
APP. # _____

APPLICATION FOR PERMIT

LOT/PP # _____ - _____ - _____

SITE ADDRESS _____ LOT SIZE _____ x _____

PROPERTY OWNER _____ OWNER PHONE # (____) _____ - _____

OWNER ADDRESS _____ OWNER CELL # (____) _____ - _____

CONTRACTOR COMPANY NAME _____

ADDRESS _____ PHONE (____) _____ - _____

CITY _____ PAGER/CELL # (____) _____ - _____

PROJECT NAME _____ SQ. FOOTAGE _____

APPLICANT TYPE: <input type="checkbox"/> BUILDING <input type="checkbox"/> DEMOLITION <input type="checkbox"/> SIGN <input type="checkbox"/> PLUMBING <input type="checkbox"/> HVAC

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

PRESENT USE:

_____ APPLICANT NAME:(PRINT) _____

APPLICANT SIGNATURE: _____

PROJECT COST: \$ _____

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

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

Use Group Application Status

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<input type="checkbox"/> Open
<input type="checkbox"/> Denied
<input type="checkbox"/> Pending

ADDITIONAL COMMENTS: _____

Amount Due: \$ _____ Amount Paid: \$ _____ (Cash / Check # _____)

MasterCard / VISA#: (circle one) _____ Exp. Date: ____/____/____ 3 Digit Code: _____

Billing Address #: _____ Zip: _____ Approved By: _____ Date: ____/____/____