



## NON-RESIDENTIAL APPLICATION FOR INSPECTION NOT REQUIRING PLANS

City of Sandusky, Division of Building

240 Columbus Avenue, Sandusky, Ohio – 419.627.5940 – [building@cityofsandusky.com](mailto:building@cityofsandusky.com)

*All sections of the application must be completed. Do not enter "same" for any field. Electric or Plumbing worksheets must be attached for any electrical or plumbing work.*

1	Scope of Project	<input type="checkbox"/> Structural	<input type="checkbox"/> Electrical	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Plumbing
2	Type	<input type="checkbox"/> Electrical Upgrade <input type="checkbox"/> Temporary Electrical	<input type="checkbox"/> Commercial Demolition ( <i>Sewer Cap permit application must be submitted with application</i> )	<input type="checkbox"/> Minor Electrical Alterations *	
		<input type="checkbox"/> Minor construction	<input type="checkbox"/> Temporary Structure *	<input type="checkbox"/> Type-A day care	
		<input type="checkbox"/> Health & Safety /Special inspection *	<input type="checkbox"/> Plumbing – Mechanical replacement of appliance *	<input type="checkbox"/> Certificate of Occupancy for existing structure**	
Describe nature of work / explain what you are doing:					
<b>OE Work Order #:</b> _____ - _____ - _____					
3	Name of Project:				
	Exact address of project:				
	City:		Zip:		
4	Owner of project:			Attention:	
	Address:			City, State, Zip:	
	Phone:			<input type="checkbox"/> Send by fax/E-mail:	
5	Name of submitter:				
	Address:		City, State, Zip:		
	Phone:		<input type="checkbox"/> Send by fax/E-mail:		
6	Type of Construction:				
7	Current use group:				
8	<b>Cost of work covered by this application:</b>				
9	If plans submitted as the result of an Adjudication Order, enter order number here:				
10	<b>Fees to be paid from Scope &amp; Type of Project</b>				
	Electrical Upgrade 400 Amps or less	\$50	\$		
	Electrical Upgrade Over 400 Amp	\$100	\$		
	Electric – Temporary Service	\$50	\$		
	Electric – Minor Electrical Alteration*	\$75	\$		
	Plumbing replacement of Appliance *	\$50	\$		
	Mechanical replacement of Appliance*	\$50	\$		
	Special inspection –Structural *	\$100 / \$225	\$		
	Special Inspection – Electrical *	\$100 / \$225	\$		
	Special Inspection – Mechanical *	\$100 / \$225	\$		
	Special Inspection – Plumbing *	\$100 / \$225	\$		
	**Certificate of Occupancy for existing structure	\$250.00	\$		
	<b>Sub-total of fees to be paid:</b>		\$		
	Board of Building Standards fee (3% x sub-total)		\$		
	<b>Total fees to be paid:</b>		\$		
11	Fees paid by: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card				
	Check number: _____				
	<b>Make check payable to: City of Sandusky, Ohio</b>				
12	I hereby certify that I am the (select one):				
	<input type="checkbox"/> Owner <input type="checkbox"/> Agent for the owner and all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above.				
	Signature				
	Date				
	Print / Type Name				
13	<b>THE AREA BELOW IS FOR OFFICIAL USE ONLY:</b> <input type="checkbox"/> Walk In <input type="checkbox"/> Mail In/E-mail				
	CPA#: _____				
	Date Rec'd: _____				

\* Inspector must approve prior to submission of permit. Fee based on complexity and must be approved by CBO.