

NEW SINGLE FAMILY DWELLING SUBMISSION REQUIRED DOCUMENTATION

PERMIT APPLICATIONS WILL NOT BE ACCEPTED IF **ANY OF THE FOLLOWING INFORMATION IS NOT SUBMITTED WITH THE APPLICATION. INCOMPLETE SUBMITTALS WILL BE RETURNED TO THE APPLICANT. WE ARE UNABLE TO HOLD PLANS AND DOCUMENTS IN THE DEPARTMENT IF THE REQUIRED INFORMATION IS NOT INCLUDED WITH THE APPLICATION**

REQUIRED DOCUMENTATION

- Topos - 11 x 17 (Scaled 1:20) or larger if necessary (Scaled 1:20) 5 Sets prepared by Civil Engineer - (5 Topos signed by owner, or submit letter stating builder has owner's permission to sign)
If spec house, builder needs to sign all 5 Topos
Show location of silt fencing on Topo
- Completed Building Permit Application
- 2 Sets of Construction Plans 24" x 36" (1/4" per ft.)

FEES

- \$2,000 Check Made Payable to the City of Westlake for Engineering Department Grading & Drainage Deposit

SUPPORTING REQUIRED DOCUMENTATION

- Systems Description Form
- Energy Efficiency Compliance Form
- Plumbing ISO (Address must be on document)
- Electrical Plan AND Load Calculation Sheet
- Smoke Detector Specs
- Gas Fireplace Specs (If Applicable)
- Manual J / HVAC Ductwork Plan **
** Sizes of all floor, wall and ceiling diffusers are to be shown. Show all balancing dampers, and outside air inlets/ducts
Specify all materials and submit product data for the furnace, condenser, thermostat and outside air supply equipment
- Engineering Letter / Verification of Beams & Headers - only if plans are NOT Architect stamped
- Flashing Details
- Attic Venting Calculations
- Roof Truss Package (If Applicable)
- Window Schedule
- I-Joist Package (If Applicable)



CITY OF WESTLAKE, OHIO
APPLICATION
 FOR PLAN
 APPROVAL AND
 CERTIFICATE OF OCCUPANCY

(PLEASE PRINT OR TYPE ENTIRE FORM)

Application Date: _____

Date Issued: _____
 Application Number: _____

Fee Description	Amount	
PLAN REVIEW		
ADDITIONAL REVIEW		
BUILDING		
B.B.S.		
TRENCH		
SIDEWALK		
RECREATION FEE		
CONSTRUCTION BOND		
TREE FEE		
SANITARY TAP		
STORM DRAINAGE		
TOTAL \$		
Grading & Drainage:		

OWNER or PROJECT NAME: _____

hereby makes application for (1) Approval to erect, build or alter a structure as described in the application and the accompanying plans, which are a part of this application and (2) a Certificate of Occupancy for the same if applicable.

LOCATION AND DESCRIPTION OF LOT

ADDRESS: _____ Sublot/Suite/ Bldg. # _____
 Development: _____ Parcel # _____
 Being _____ feet front and _____ feet deep on the
 Side Being _____ feet rear and _____ feet deep on the
 Side Total lot square footage _____

DESCRIPTION OF BUILDING, STRUCTURE OR ALTERATION

Project Description: _____ NO. OF STORIES: _____
 FLOOR AREA: _____ FRONT YARD SETBACK: _____
 GROSS SQ. FOOTAGE: _____ REAR YARD SETBACK: _____
 LENGTH: _____ SIDE YARD SETBACK: _____
 WIDTH: _____ SIDE YARD SETBACK: _____
 HEIGHT: _____ ESTIMATED VALUE: _____

SHORTEST DISTANCE TO ANY BUILDING ON ADJOINING LOT _____
 SHORTEST DISTANCE TO ANY BUILDING ON SAME LOT _____

ADDITIONAL INFORMATION REQUIRED TO BE COMPLETED ON COMMERCIAL BUILDINGS

USE GROUP: _____ OBC LIVE LOAD: _____ OBC
 CONSTRUCTION TYPE: _____ OBC OCCUPANCY LOAD: _____ OBC
 FIRE SUPPRESSION: _____ (Full) or _____ (Partial)

Commercial: IF PROJECT IS A BUILDING ADDITION OR ALTERATION COMPLETE THE FOLLOWING FOR THE EXISTING BUILDING

A. Area - Square Feet Basement _____ 1st Floor _____ 2nd Floor _____ 3rd Floor _____ Other Floors _____ Total _____	B. Walls <input type="checkbox"/> Masonry <input type="checkbox"/> Frame, Wood <input type="checkbox"/> Metal <input type="checkbox"/> Other (specify) _____
	C. Roof <input type="checkbox"/> Wood Frame <input type="checkbox"/> All Metal <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Heavy Timber <input type="checkbox"/> Other _____
	D. Floors <input type="checkbox"/> Wood on Wood Joists <input type="checkbox"/> Concrete Steel Joists <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Slab <input type="checkbox"/> Other _____
	E. Ceilings Exposed Joists Plaster on Fire Rated Dry <input type="checkbox"/> Steel <input type="checkbox"/> Wood <input type="checkbox"/> Lath <input type="checkbox"/> Wall or Tile Rating in Hours <input type="checkbox"/> _____

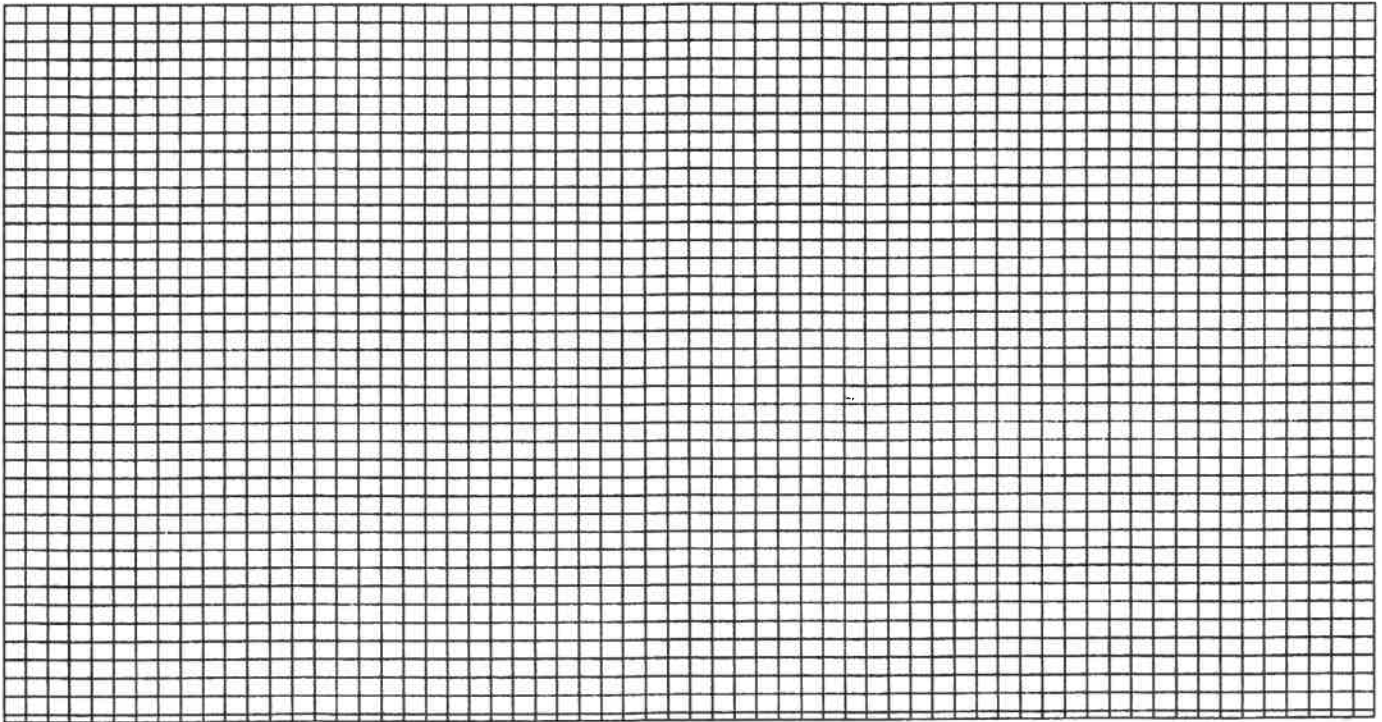
	Address	City, State, Zip	PHONE	E-mail
Architect				
Engineer				
General Contractor				
On Site Project Manager				

If survey, site plan, or topographical map is not available, please indicate the following on graph:

Show all lot lines and all lot dimensions.

Show all streets bounding property

Give distances from building to lot and street lines and other buildings on same lot, also buildings on adjacent lots



The Plan Approval herein applied for shall constitute an agreement on my part to abide by all the conditions herein contained and to comply with all the ordinances of the City of Westlake, and the laws of the State of Ohio relating to the work to be done thereunder; and said agreement is a condition of said approval..

Agent or Owner (Please print) _____ (Signature) _____

Company Name _____ Email: _____

Address _____

Telephone Number _____ Cell or Alternate Number: _____



BUILDING DEPARTMENT

27700 Hilliard Blvd.
Westlake, OH 44145

Phone 440.617.4105
Fax 440.617.4144

RESIDENTIAL ENERGY COMPLIANCE DECLARATION FORM

Job Site Address: _____

Applicant shall indicate the energy compliance option below: Check **ONE** option.

- 1.) 2019 RCO Prescriptive, 1101.14 through 1104. (check one of the following)*
 - 1a Simplified prescriptive, 1102.1.
 - 1b UA Alternative, 1102.1.5 (attach RES-CHECK per 2018 IECC)
- 2.) 2019 RCO Simulated Performance Alternative, 1105. (attach Ecotrope, REM/Rate, Energyguage USA, DOE-2, or other)*
- 3.) 2019 RCO Energy Rating Index (ERI), 1106. (attach Ecotrope, REM/Rate, Energyguage USA, or other)*

* Air leakage testing (blower door) & verification report required – 5 ACH or less.

* Duct leakage (tightness) testing & verification report required, if outside conditioned space.

- 4.) 2019 RCO OHBA Alternative, 1112. (check one of the following)**
 - 4a Compliance path #1, 1112.1.2
 - 4b Compliance path #2, 1112.1.2

** Air leakage testing (blower door) & verification report required – less than 5 ACH.

** Duct leakage (tightness) testing & verification report required if outside conditioned space.

- 5.) 2018 IECC R (check one of the following)***
 - 5a Simplified prescriptive, R402.1
 - 5b Total UA alternative, R402.1.5 (attach RESCHECK per 2018 IECC)
 - 5c Simulated Performance Alternative, R405. (attach Ecotrope, REM/Rate, Energyguage USA, or other)
 - 5d Energy Rating Index, R406. (attach Ecotrope, REM/Rate, Energyguage USA, or other)

*** Air leakage testing (blower door) & verification report required – 3 ACH or less. R402.4.1.2.

*** Duct leakage (tightness) testing & verification report required if outside conditioned space. R403.3.3.

- 6.) 2019 RCO Existing Buildings, 1107, 1108, 1109, and 1111. Existing buildings (additions, alterations, repairs, and change of occupancy / use, shall comply with these sections.

Required for ALL Options Chosen

303.4 Mechanical Ventilation

Where the air infiltration rate of a dwelling unit is 5 air changes per hour or less where tested with a blower door at a pressure of 0.2 inch w.c. (50 Pa) in accordance with Section 1102.4.1.2 or Section 1112.2.4.2.1, the dwelling unit shall be provided with whole-house mechanical ventilation in accordance with Section 1505.4.

City of Westlake 2019 Residential Code of Ohio Systems Description Form

Applicant/General Contractor: _____ Phone: _____

Address of Project: _____ Sublot: _____

Project Description: _____

Electrical System Description a,b

Service Size (Amps)	Size of Service Entrance Conductors	Panel Location(s)	Number of Sub-Panels	Location
<input type="checkbox"/> 100 Amp <input type="checkbox"/> 200 Amp <input type="checkbox"/> Over 200 Amp				<input type="checkbox"/> Overhead <input type="checkbox"/> Underground

a. Provide a detailed electrical diagram for review and approval.

b. Provide detailed electrical and gas piping diagrams for generator installations.

HVAC System Description

Heating Equipment Type, Size & Efficiency	Design Heat Loss (Btu/h)	Type of Fuel	Location of Equipment
<input type="checkbox"/> Forced Air Btu/h _____ Eff. _____ <input type="checkbox"/> Boiler Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump Btu/h _____ Eff. _____ <input type="checkbox"/> Electric kW _____ Eff. _____ <input type="checkbox"/> Geothermal kW (Btu/h) _____ Eff. _____		<input type="checkbox"/> Natural Gas <input type="checkbox"/> LP <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other _____	<input type="checkbox"/> Basement <input type="checkbox"/> Attic <input type="checkbox"/> Closet <input type="checkbox"/> Crawl Space <input type="checkbox"/> Outdoor

Cooling Equipment Type, Size & Efficiency	Design Heat Gain (Btu/h)	Location of Equipment
<input type="checkbox"/> AC Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump Btu/h _____ Eff. _____ <input type="checkbox"/> Geothermal kW(Btu/h) _____ Eff. _____		<input type="checkbox"/> Outdoor <input type="checkbox"/> Other _____

Area of Conditioned Space (sq. ft.)	Duct Size (Supply and Return)

Plumbing System Description

ISO Required for New Dwellings and Alterations to Plumbing System

ITEM	QTY.	ITEM	QTY.	ITEM	QTY.
Water Closet		Laundry Tray		Pressure Reducing Valves	
Lavatory Sink		Floor Sink		Garbage Disposal	
Hot Tub		Sump Pump		Clothes Washer	
Kitchen Sink		Floor Drain		Dishwasher	
Bathtub / Shower		Hot Water Heater		Backflow Device	

WATER HEATER	Location:	<input type="checkbox"/> Basement	<input type="checkbox"/> Garage	<input type="checkbox"/> Attic	<input type="checkbox"/> Other
	Fuel Type:	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Other	
	Capacity:	BTUs	<input type="checkbox"/> Tankless		
WATER SERVICE	Type:	<input type="checkbox"/> Copper	<input type="checkbox"/> PVC / Plastic	<input type="checkbox"/> Other	<input type="checkbox"/> Extend Line
	Size:	<input type="checkbox"/> 3/4"	<input type="checkbox"/> 1"	<input type="checkbox"/> 1-1/4"	<input type="checkbox"/> 1-1/2" <input type="checkbox"/> 2"

Fuel Gas System Description

Size of Fuel Gas Main	Piping Materials
	<input type="checkbox"/> Steel Pipe Sch. 40 <input type="checkbox"/> CSST <input type="checkbox"/> Other _____



City of Westlake

27700 HILLIARD BOULEVARD • WESTLAKE, OHIO 44145 • (440) 871-3300

Dennis M. Clough, Mayor

Fax: (440) 617-4189

**SURVEYOR MUST SUBMIT FOOTER VERIFICATION TO THE ENGINEERING DEPARTMENT,
AFTER EXCAVATING,
PRIOR TO SCHEDULING THE FOOTER INSPECTION.
ENGINEERING & BUILDING DEPT.
INSPECTION CERTIFICATE**

**Single Family Homes
Bottom of Footer Elevation**

I hereby certify that the Bottom of Footer Elevation of subplot # _____
In the _____ sub-division
at _____ was Observed to be _____.
Address & Street Name

The proposed survey and grading/plot plan for the above subplot
shows the proposed sub-grade elevation to be _____.

Date of Survey : _____

Signature of Professional Surveyor

Engineering Approval

Date Approved