

Zoning Permit # _____

Date: _____

County of Summit; Building Standards Division

1030 East Tallmadge Avenue
Akron, Ohio 44310
330.630.7280 330.630.7296 FAX

Residential Plan Submittal New Construction & Additions 50.50 Fee)
(Accessory Buildings / Alterations / Decks / Garages 25.25 Fee)

Project Location: _____

City / Village: _____ Zip: _____ Township: _____

(Addresses for new residential projects can be obtained by calling (330) 630-7305 for City of Akron Projects, or contact the Summit County Engineer at (330) 643-2850 for all other locations under our jurisdiction. The applicant is responsible to verify that the project location is within the jurisdiction of the County of Summit Building Standards Division). Refunds will not be issued.

Plan Certificate **RPR #12-** _____

Parcel Number: _____

Owner: _____

Phone: _____

Address: _____

City: _____

Zip: _____

General Contractor: _____

Phone: _____

Address: _____

City: _____

Zip: _____

e-mail: _____

Cell: _____

Project Information: NEW / ADDITION / ALTERATION

Project Description: _____

Number of Bedrooms: _____

Deck / Porch Yes No Size: _____

Estimated Project Cost: _____

Garage Sq. Footage: _____

Basement Sq. Footage: _____

1st Floor Sq. Footage: _____

2nd Floor Sq. Footage: _____

Total Square Footage: _____

"2006 Residential Code of Ohio"
Required Construction Documents

Drawing Index:

- Site Plan
- Foundation
- Elevations
- 1st Floor
- 2nd Floor
- Wall Section
- Electrical / HVAC / Plumbing Details

"RCO" Requirements

- Index
- Site Plan / Flood Hazard Area **Yes** **No**
- Floor Plans
- Exterior Wall Envelope (Res Check Compliance Cert.)
- Sections (Cross, Floor, Roof and Wall)
- Structural Details
- Fire Resistance Ratings
- Mechanical Plans / Details

Electrical Installation shall comply with the 2008 National Electrical Code.

Electrical Service Size _____ Amps Location: _____ Overhead / Underground

HVAC Installation shall comply with "RCO" Mechanical Chapters.

Central Heating System _____ Btu's AFUE Efficiency Rating _____ Fuel Type _____

Central A/C _____ tons SEER Rating _____

Plumbing Installation shall comply with the 2007 Ohio Plumbing Code.

No. of Baths _____ Water Heater Size _____ gallons Fuel Type _____

Sewer / Septic Sump Pump Yes No Gravity Drainage Yes No

The State of Ohio Enforces the 2006 International Energy Conservation Code (2006 IECC)

The County of Summit is located in Climate Zone 5 (Refer to Table N1102.1)
_____ 2006 Res. Check Compliance Certificate Enclosed (www.energycodes.gov)

Required Inspection to be performed by the County of Summit Building Standards Division:

- | | | |
|--------------------------|---|-----------------------------------|
| 1. Footing | 4. Building and HVAC Rough-In's | 7. Building and HVAC Finals |
| 2. Foundation | 5. Insulation (Building Thermal Envelope) | 8. Issue Certificate of Occupancy |
| 3. Mechanical Rough-In's | 6. Mechanical Finals | |

It shall be the responsibility of the owner/applicant to schedule the above inspections, and to provide access for Building Standards Personnel, during normal business hours.

I hereby do certify that all required information and details are true and correct, and have been included with the plans submitted. Furthermore, I agree to schedule all the required inspections with the County of Summit, Building Standards Division prior to concealment of any construction.

Name: _____ Title: _____

Signature: _____ Company: _____

Phone: _____ Cell: _____

e-mail: _____

Office Use Only:

Plan Compliance / Non-Compliance

Plan Examiner: _____ Date: _____

Reviewer Notes: _____