



BUILDING DIVISION
 200 S. Hamilton Road
 Gahanna, Ohio 43230
 Phone: 614-342-4010
 Fax: 614-342-4100
 Building@Gahanna.gov
 www.gahanna.gov

INTERNAL
Permit No. _____
Master No. _____
Received _____

RESIDENTIAL BUILDING PERMIT APPLICATION

TO REQUEST AN INSPECTION, CALL 614-342-4010 & PRESS 1, OR SCHEDULE ONLINE AT [HTTPS://OHGA.ONLAMA.COM/](https://OHGA.ONLAMA.COM/)

<input type="checkbox"/> 1 FAMILY	<input type="checkbox"/> 2 FAMILY	<input type="checkbox"/> 3 FAMILY
JOB SITE ADDRESS:		PARCEL ID NO(S).
Estimated Cost of Entire Project:		Square Footage for Project Scope of Work:
DESCRIPTION/SCOPE OF WORK:		
PROPERTY OWNER Name:		
Property Owner Address:		
Property Owner E-mail:		Property Owner Phone No.:
CONTRACTOR Name:		
Contractor Address:		Contractor Phone No.:
Attach a Certificate of Liability Insurance with a minimum amount of \$500,000.		Contractor E-mail:
REGISTERED DESIGN PROFESSIONAL Name:		<input type="checkbox"/> architect <input type="checkbox"/> designer <input type="checkbox"/> engineer <input type="checkbox"/> other: _____
Registered Design Professional Address:		State License No.
Registered Design Professional E-mail:		Registered Design Professional Phone No.:

CERTIFICATION

I certify that I am the property owner or the authorized agent representing the owner, and that the information on this application is complete and accurate to the best of my knowledge, and that the information contained on drawings and text are a true and accurate representation of the dimensions and facts applicable to this request, and that there are no deed restrictions that prohibit this work.

Name: _____ Title: _____

Signature: _____ Date: _____

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RESIDENTIAL BUILDING PERMIT APPLICATION (CON'T)

TO REQUEST AN INSPECTION, CALL 614-342-4010 & PRESS 1, OR SCHEDULE ONLINE AT [HTTPS://OHGA.ONLAMA.COM/](https://ohga.onlama.com/)

<input checked="" type="checkbox"/>	This application is NOT a permit. No work may begin until a permit is issued.	
<input checked="" type="checkbox"/>	When each phase of work is complete, an inspection is required. To request inspection, call 614-342-4010 & press 1, or schedule online at https://ohga.onlama.com/	
<input checked="" type="checkbox"/>	2 sets of construction documents to be submitted.	
<input checked="" type="checkbox"/>	1 PDF digital copy of construction documents to be submitted.	
<input type="checkbox"/>	Check box if project includes use of an industrialized unit.	
<input type="checkbox"/>	Check box if project includes use of an assembly of individually listed or labeled products.	
FEES	TYPE OF WORK (check all that apply)	
\$1895	<input type="checkbox"/> NEW CONSTRUCTION (includes 10 inspections; address, park and zoning certificate fees are additional) <input type="checkbox"/> 1 family <input type="checkbox"/> 2 family <input type="checkbox"/> 3 family	
\$300	<input type="checkbox"/> ADDITION (includes 5 inspections)	
\$250	<input type="checkbox"/> ALTERATION (includes 3 inspections)	
\$50	<input type="checkbox"/> CERTIFICATE OF OCCUPANCY (includes 1 inspection)	
\$100	<input type="checkbox"/> DECK (includes 3 inspections)	
\$100	<input type="checkbox"/> DEMOLITION (includes 1 inspection)	
\$100	<input type="checkbox"/> FENCE (higher than 6' – requires proof of variance through the Zoning Division) (includes 2 inspections)	
\$250	<input type="checkbox"/> GARAGE (detached: misc. and utility structures including sheds over 200 sq. ft.) (includes 5 inspections)	
\$50	<input type="checkbox"/> PERMIT REINSTATEMENT (includes no revision to construction documents)	
\$150	<input type="checkbox"/> PLAN REVISION (after plan approval) - new home	
\$50	<input type="checkbox"/> REPLACEMENT BUILDING CARD	
\$75	<input type="checkbox"/> ROOFING (ice guard required) (includes 2 inspections) <i>select options below:</i> <input type="checkbox"/> tear off & re-roof <input type="checkbox"/> sheathing repair/replacement <input type="checkbox"/> roof over (allowed 1x per RCO)	
\$	SWIMMING POOL (electrical permit may be required) <input type="checkbox"/> IN GROUND - \$200 (includes 2 inspections) <input type="checkbox"/> ABOVE GROUND - \$100 (includes 1 inspection) DRAINAGE IS TO: <input type="checkbox"/> storm sewer <input type="checkbox"/> sanitary sewer <input type="checkbox"/> open ditch	
\$150	<input type="checkbox"/> ADDITIONAL INSPECTIONS: _____ no. of additional inspections purchased (only the specified included number of inspections are allotted with the permit; all additional inspections must be purchased prior to scheduling inspections.) NOTE: there will be no refunds for unused inspections.	
\$	TOTAL FEES - payment due at time permit is issued; includes BBS fees. reference: Building & Zoning Fee Schedule	INTERNAL USE: PAID <input type="checkbox"/> PAYMENT: _____ RECD. BY/DATE: _____
<input checked="" type="checkbox"/>	If work is determined to be more extensive than represented on this application, additional fees may be required.	

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