P.O. BOX 339 333 THIRD AVENUE GALLIPOLIS, OHIO 45631 740-441-6022

APPLICATION FOR 1-2-3 UNIT RESIDENCE

Owner				
Street Address				
Daytime Phone #				
Address of Proposed Work	Same			
Type of Units				
Single Family Unit	Two Family Unit Three Family Unit			
Type of Work				
Contractor				
Cost of Project				
Fees:				
Base Fee	Free			
Base Fee \$ 1000-\$9999 Project		\$75.00)	
Base Fee \$ 10000-\$99,999 Project		\$125.0	0	
Base Fee \$ 100, 000+ Project		.2% of Proje	ect Cost	
Hearing Fees		\$100.0	0	
Flood Plain Permit		\$75.00		
Late Application Fee		\$50.00		
Other items required/before issuance of permit(if applicable)				
Water Tap	Flood Hazard			
Sewer Tap		Planning Approval		
Address Assignment	BZA Approval			
Curb Cut	Historic Approval			
I hereby swear or affirm that all the information provided and drawings attached are to the best of				
my knowledge, truthful and accurate. My signature below waives the City of Gallipolis from				
all liability. Anything over 3 units will require a State permit through Ohio Department of Commerce.				
The owner/contractor will be responsible for all other necessary paperwork and approvals for the project.				
A DDI TO A NUMBER OF COLUMN				
APPLICANTS SIGNATURE	<u></u>			
DATE PAID	RECE	CIPT#	PE	RMIT#