

CITY OF SPRINGDALE - BUILDING DEPARTMENT

11700 SPRINGFIELD PIKE SPRINGDALE, OHIO 45246 PHONE: 513-346-5730 FAX: 513-346-5747 WEBSITE: www.springdale.org/building-department.aspx EMAIL: Building@Springdale.org

Application / Permit	
Number	

GENERAL APPLICATION FOR PERMIT

Project Name:	(Please provide a commo	on name to describe this project)	Parcel ID: (Auditor's Website)	0 5 9 9 0 0	
Project Location:	(Street No.)	(Street Name)		(Springdale, Ohio) (Zip Code)	
Contact Info: Property Owner:	(Sileet No.)	(Street Name)		(Springdale, Ohio) (Zip Code)	
(Nam	ne: As per Auditor's Websi	te.)		(Daytime Phone Nunber)	
(Mail	ing Address: Street No; St	rreet Name, City, State, Zip)		(E-mail Address)	
Applicant:(Nam	ne)			(Daytime Phone Nunber)	
(Mail	ing Address: Street No; St	reet Name, City, State, Zip)		(E-mail Address)	
THIS APPLICATION Special Flood Hazard		□ Residential (R □ Non-Residential (R □ Proposed Use 0	ial (OBC; Comme	ercial)	
O Fire Pumps O Standpipes O Hood Supp O Fire Alarm O Alternative Sys ☐ FLOOD DEVELOPM	(SF)(per Bldg)(Dates) as(Ea)(SF) EWORK AY alks) SYSTEM m(SF)(Ea)(Ea)(Ea)(SF)(SF)(SF) MENT	□ BUILDING 1st Floor 2nd Floor Bsmt Garage Deck/Porch Total Sq Ft O Shell Building □ Reroofing/Miscellane structures: O Re-Roof Ex Bldg O Tents O Retaining Walls O Certificate of Occupar O Misc Buildings O Awnings and Marquee □ PLUMBING SYSTEMS (Hamilton County Public Health) □ ELECTRICAL SYSTE (Inspection Bureau Inc. (IBI)) □ RENTAL UNIT PERMI	(SF)(SF)(SF)(SF)(SF) ous(SF) Ous(SF)(Dates)(Length) ncy Only PS MS T(SF)	O Mechanical Systems O New/Add Systems O Alterations Ex O Unit Replacement # Units: Size: (Tons/N O Kitchen Exhaust Sys # Units: O Gas Piping # Meters: O Refrigerant Piping: O Misc Equipment □ SIGNS No of Signs O Wall(Illuminated) (Non-Illum) O Projecting/Ground O Pole Sign O Directional Sign O Panel Changes O Temporary Signs O Other Signs	(SF) BBTUH) (Ea) (Ea) (SF) (SF) (SF) (SF) (SF) (Ea) (Ea) (Ea) (Ea)



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ENERGY CODE COMPLIANCE CHECKLIST

Required by the **State of Ohio** for all new construction, additions and alterations involving building envelope and/or alterations to mechanical or electrical equipment.

		Residential	Commercial		
Stree	et address				
City,	State			Zip Code	
CHEC	CK ONE				
	<u>COMMERCIAL:</u> Code option: (Check One)		Method of Compliance: (Check One)		
	2	012 IECC	Prescriptive tables		
	2	010 ASHRAE 90.1	COMcheck or e	qual	
			Performance ar	nalysis software	
	<i>RESIDE</i> Code op	<i>NTIAL:</i> otion: (Check One)	Method of Compliance	e: (Check One)	
		019 RCO 1101 2018 IECC)	IECC prescriptiv	ve table 402.1	
		019 RCO Section 1105 Simulated Performance)	RCO prescriptiv (2019 RCO)	e table 1102.1.2	
		019 RCO Section 1106	OHBA prescript	ive table 1112.2.1	
	(E	Energy Rating Index)	REScheck or ed	qual	
		019 RCO Section 1112 DHBA Option)	Performance ar	nalysis software	
	2	018 IECC	ERI Analysis So	oftware	