| Receipt No. | |
|-------------|--|
| Permit No. | |

CITY OF ELYRIA PERMIT APPLICATION 1,2,3 FAMILY FOUNDATION REPAIR/REPLACEMENT OR WATERPROOFING Please Print Clearly

| Address | Parcel No | | Date |
|--|---|---|--|
| Owner | Address | | Ph |
| | E-mail | | |
| Contractor | Address | | Ph |
| | E-mail | | |
| No. of Dwelling Units? | Owner Occupied? | | |
| | lity to complete this application | n and provide all required di | awings. If you haven't the |
| ability to do so, please consult Note: For foundation REPAIRS and | t someone who does. WATERPROOFING complete A & B. F | or REPLACEMENT WALLS comp | lete the entire application. |
| A. Areas involved in repair/1 | replacement Describe work to b | pe completed: | |
| B. Size and type of footing ti | leType an | nd depth of stone-fill | Will footing water |
| | or by sump pump | | |
| | or sy camp pamp | | till of discharge se ditered |
| n yes explain | | | |
| Footing thickness; Size o windows to be replaced and width, etc. Warning: If, during the course of | tify all materials and dimensio ; Footing width ; f sill plate ; Type of ; (Areas | Footing depth below grade f anchorage below grade must be ventile to the sanitary sewer is expose | ; Foundation ; Size and number of lated); Column pad thickness and, the cross section |
| | er from footing drains shall be responsible for requesting an ins | | |
| inform the City of Elyria of any e The undersigned hereby cert undersigned owner or owner's ag | exposed cross connections. Failure cifies that the information contained gent, by commencing or authorizing Federal codes relative to discharge | e to comply may result in legal ed herein is accurate to the be ng commencement of work, ta | action by the City of Elyria. st of his/her knowledge. The kes full responsibility for |
| Warning: Beginning work with | out permit in hand shall result in | payment of a double fee (1317 | .07, Elyria Codified Ordinances) |
| Total cost of construction \$ | \$ <u>.</u> | | |
| Signature of Owner /Owners Ago | ent: | . <mark>Print:</mark> | |
| | \$10.00 per \$1,000 of total cos | | |
| BUILDING DEPT. USE ONLY Date Approved/Inspector Fee \$ | ': | Date Rejected/Inspector Remarks: | |