Receipt No.	
Permit No.	

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

Address	Parcel No		
Owner	Address		Ph
	E-mail		
Contractor	Address		Ph
	E-mail		
No. of Dwelling Units?	Owner Occupied?		
	ity to complete this application	and provide all required dra	awings. If you haven't the
ability to do so, please consult Note: For foundation REPAIRS and V	someone who does. VATERPROOFING complete A & B. Fo	r REPLACEMENT WALLS comple	ete the entire application.
A. Areas involved in repair/re	eplacement Describe work to be	e completed:	
B. Size and type of footing tile	e Type and	d depth of stone-fill	Will footing water
discharge by gravity	or by sump pump	; Will the existing pa	th of discharge be altered
, If "yes" explain			
material; Size of windows to be replaced and width, etc. Warning: If, during the course of must be removed and the water of the owner and/or contractor are inform the City of Elyria of any extended in the windersigned hereby certification.	; Footing width; Type of; (Areas to; (Areas t	anchorage pelow grade must be ventile to the sanitary sewer is expose echanically removed by pure pection before covering or con- to comply may result in legal d herein is accurate to the besig commencement of work, take	; Size and number of ated); Column pad thickness ed, the cross section mping it to an approved outlet. cealing any work and shall action by the City of Elyria. st of his/her knowledge. The tes full responsibility for
system.	ut permit in hand shall result in p		
Total cost of construction \$	•		
Signature of Owner /Owners Age	nt:	. <mark>Print:</mark>	
(\$35.00 +	\$12.00 per \$1,000 of total cost	of construction or fraction	ı thereof.)
BUILDING DEPT. USE ONLY Date Approved/Inspector Fee \$	D	ate Rejected/Inspector emarks:	