

<b>PERMIT #</b> _____
Parcel No. _____
Zoning _____ S/L _____



## City of Aurora, Ohio - Planning, Zoning and Building Division

129 W. Pioneer Trail, Aurora, OH 44202 330.562.9564 Fax: 330.562.9719 www.auroraoh.com

**BUILDING APPLICATION FOR  
MISCELLANEOUS RESIDENTIAL PERMITS**

**PLEASE PRINT:**

Project Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Owner's Address (if different than above): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

General Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email: \_\_\_\_\_

**PROJECT INFORMATION:**

Type of Project:	
___ Electric – Temporary Service (Ohio Edison Work Order Number _____)	\$50.50
___ Electric – Permanent Service (Ohio Edison Work Order Number _____)	\$50.50
___ Electric – Service Upgrade	\$50.50
___ Electric – Miscellaneous	\$50.50
___ Generator	\$50.50
___ HVAC – Furnance Only	\$50.50
___ HVAC – A/C Only	\$50.50
___ HVAC - Furnace & Air Conditioning	\$85.85
___ Plumbing Gasline	\$50.50
___ Plumbing Miscellaneous	\$50.50
___ Replacement Windows (total # _____ location(s) _____)	\$50.50
___ Replacement Door (type (sliding, front door, etc.) _____)	\$25.25

___ Roof ( ___ Complete Tear Off ___ Asphalt Shingles ___ Shake ___ Metal)	\$50.50
___ Gutters	\$25.25
___ Siding	\$50.50
___ Waterproofing	\$50.50
___ Chimney Repair (Structural Only)	\$50.50
___ Foundation Repair (Include Drawing)	\$50.50
___ Storm Sewer Repair	\$25.25
___ Drain Tile	\$25.25
___ Replacement Water Heater	\$25.25

This price list is for Residential projects only. Please call our office at 330-562-9564 for Commercial Pricing.

Acceptance of the permit herein applied for shall constitute an agreement on my/our part to abide by all conditions herein contained and to comply with all ordinances of the City of Aurora and the laws of the State of Ohio relating to all work to be done thereunder; and said agreement is a condition of said permit. **I understand that I am responsible to request appropriate inspections for the project.**

Applicant Signature \_\_\_\_\_  
Sign & Print Name
Owner/Agent

**FOR PLANNING, ZONING & BUILDING DIVISION USE ONLY**

DATE APPLICATION RECEIVED _____	TOTAL \$ _____
RECEIVED BY _____	PERMIT NO. _____
CASH _____ CREDIT CARD _____	
CHECK NUMBER _____	