

# Subsequent Submittal Application

For more information: 513-745-8520 / www.BlueAsh.com/Departments/Community\_Development/Permits



Community Development • 4343 Cooper Road • Blue Ash, Ohio 45242 • email: cdpermits@blueash.com

- Residential (2 plan sets)
- Commercial (3 plan sets; 2 for signs)  
PLANS MUST BE STAPLED IN SETS

Site Address \_\_\_\_\_ Suite \_\_\_\_\_

Commercial Tenant \_\_\_\_\_

Description of Changes: \_\_\_\_\_

OFFICE USE ONLY
BA -

cc: FD (w/plan)  ED  Eng.

PLEASE PRINT	PROPERTY OWNER	APPLICANT	CONTRACTOR
Contact Name & Company			
Street Address			
City, State, & Zip			
Phone Number			
Email			

Check One:

<input type="checkbox"/> <b>CORRECTIONS / ADD'L INFO</b> – requested by Plans Examiner for plans under review <input type="checkbox"/> <b>AMENDMENTS</b> – changes by applicant to plans currently in plan review <input type="checkbox"/> <b>REVISIONS</b> to approved plans for Permit # _____ (required)
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Type of Permit:

New Building	Fire Suppression <sup>3</sup>	Sign <sup>3</sup>
Addition	Fire Alarm <sup>3</sup>	Accessory Structure/Pool
Alteration/Remodel	Kitchen Exhaust Hood	Deck
Change of Use/Occupancy	Hood Suppression <sup>3</sup>	Fence
HVAC <sup>2</sup>	Electric <sup>2</sup>	Other _____

**All information contained in this application is true, accurate, and complete to the best of my knowledge and I do hereby agree to complete the project in compliance with all relevant building codes, zoning, and other governing codes.**

Applicant Name (Owner Rep.) (print) \_\_\_\_\_ Email \_\_\_\_\_

Phone (one # only) \_\_\_\_\_  cell  office  home

Signature of Applicant /Owner Rep. \_\_\_\_\_ Application Date \_\_\_\_\_

2017 v.2	OFFICE USE ONLY
CASH ___ VS ___ MC ___ CK# _____	
Deposit \$ _____	Rec'd By _____
OBBS Fee \$ _____	Total \$ _____
Balance Due \$ _____	
Building Approved _____	Date _____
Zoning Approved _____	Date _____