

CITY OF BEAVERCREEK

TENANT IMPROVEMENT EXTERIOR & INTERIOR ZONING PERMIT

Date _____

Permit _____

Fee _____

Plan Review Fee _____

INSTRUCTIONS: Complete this application and attach 2 copies of a complete set of architectural drawings showing the exterior façade, interior design, awning and signage.

1. Address of Property _____ Zoning District _____

2. Lot No. _____ Subdivision _____ Parcel ID B42000__00__00__00

3. Name of Property Owner _____ Telephone _____

4. Business Name _____ Telephone _____

5. Business Owner _____ Telephone _____

6. Name of Contractor _____ Telephone _____

7. Proposed Activity or Use _____

8. Tenant Improvement: Exterior Interior Awning Wall Signage Use Compliance

9. Scale drawing of proposed construction. (Complete all lines.)

A. Dimension of tenant space

Width _____ feet

Depth _____ feet

B. Dimensions of Awning

Width _____ feet

Depth _____ feet

Height _____ feet

C. Dimension of Signage

Width _____ feet

Height _____ feet

Total Square Footage of Sign: _____ square feet

D. Estimated Construction Cost

\$ _____

9. Net square feet of floor space excluding elevator shafts, stairways, hallways, mechanical equipment areas, restrooms and utility area.

First Floor _____ Second Floor _____ Third Floor _____ Total _____

I hereby certify that I am the property owner, or am authorized to act as the owner's agent in obtaining this permit. I further certify that all of the information and attachments submitted with this application are true and correct to the best of my knowledge and that the property owner is responsible for locating and verifying all property lines and boundaries. I understand that if this information is incorrect or incomplete, any permit issued may be invalid and the property owner may be required to remove this structure at his/her own expense. I hereby consent to the inspection of the subject property and of any buildings or structures relevant to this application. Any deviation from the approved plans will require submission and approval of the revised plans.

Applicant's Email Address (Please print)

Applicant's Signature

This application is: Approved Disapproved

Remarks: _____

Planning Department

Date

NOTE: ADDITIONAL PERMITS REQUIRED

Greene County Building Permit _____

Beavercreek Fire Department _____

Case No. _____