



DIVISION OF BUILDING STANDARDS
 COUNTY OF SUMMIT ♦ EXECUTIVE ILENE SHAPIRO
 1030 E. TALLMADGE AVENUE ♦ AKRON, OHIO 44310
 330.630.7280 ♦ FAX: 330.630.7296
 buildingstandards.summitoh.net

COMMERCIAL SITE IMPROVEMENT INSPECTION FEES

PERMIT #

- | | |
|---|-----------------------------------|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> EXISTING |
| <input type="checkbox"/> ALTERATION | <input type="checkbox"/> ADDITION |
| <input type="checkbox"/> COMMERCIAL | |

JOB ADDRESS _____
 VILLAGE/TWP/CITY _____
 DATE _____ INIT. _____
 PARCEL # _____ SQ. FT. _____

PROJECT INFORMATION:

PROPERTY OWNER			
ADDRESS STREET	CITY/TOWN	STATE	ZIP
TELEPHONE #	CELL #	E-MAIL	
CONTRACTOR INFORMATION		TELEPHONE #	CELL #
ADDRESS STREET	CITY/TOWN	STATE	ZIP

PAYMENT METHOD

CHECK # _____ CASH M/C DISCOVER AMEX
 GENERAL CONTRACTOR SIGNATURE _____ DATE _____

FEE SCHEDULE:

ESTIMATED COST OF CONSTRUCTION.....\$ _____

COMMERCIAL SITE IMPROVEMENT INSPECTION FEES
 \$100 BASE FEE PLUS THE FOLLOWING

GRADED AREAS	\$5 PER \$1,000 OF JOB COST _____
PAVED AREAS/PARKING LOTS/DRIVEWAYS	\$5 PER \$1,000 OF JOB COST _____
PARKING LOT STRIPING (NEW PARKING LOTS ONLY).....	\$1 PER SPACE _____

ALL FEES ARE BASED ON THE APPROVED CONSTRUCTION DOCUMENTS AS SUBMITTED TO THE LOCAL ENGINEERING DEPARTMENT.

*A RE-INSPECTION FEE will be charged for each failed inspection, Residential and Commercial	1st Re-inspection.....\$30.00
	2nd Re-inspection.....\$30.00
	3rd Re-inspection.....\$60.00
	4th Re-inspection.....\$80.00

SUB-TOTAL _____
 TOTAL FEES DUE _____

*Fees are payable in advance and not refundable

PROJECT DESCRIPTION _____

