

CITY OF LYNDHURST BUILDING DEPARTMENT

INSPECTOR
Steve Rodriguez
Joe Verbiar

BUILDING COMMISSIONER
John Maichle
5301 Mayfield Road, Lyndhurst, Ohio 44124
440-473-5108/Fax: 440-442-7189

SECRETARY
Sheila Manfredi
Kari Link

**APPLICATION FOR PERMIT TO INSTALL
AND/OR REPLACE CONCRETE OR ASPHALT**

OWNER'S NAME: _____

LOCATION OF WORK: _____

CONTRACTOR: _____

ADDRESS: _____

CITY: _____

CONTRACTOR'S PHONE: _____

I/WE ARE REQUESTING A PERMIT FOR THE FOLLOWING WORK. PLEASE INDICATE ALL THAT MAY APPLY:

NEW OR REPLACEMENT CONCRETE OR ASPHALT DRIVEWAY:

Residential	FEE \$25.00
Commercial	FEE \$35.00

NEW OR REPLACEMENT CONCRETE DRIVEWAY APRON:

Residential	FEE \$20.00
Commercial	FEE \$25.00

WIDENING OF DRIVE OR APRON (RESIDENTIAL) FEE \$15.00

REPLACE OR REPAIR CATCH BASIN FEE \$5.00 EACH (Inspection Req'd)

RESURFACING RESIDENTIAL ASPHALT DRIVEWAY: FEE \$20.00

GARAGE BASE: FEE \$25.00

PATIO PAD/BRICK PAVER PATIO (SITE PLAN REQUIRED) FEE \$25.00

SERVICE WALK (NEW/REPLACEMENT) (SITE PLAN REQUIRED) FEE \$20.00

PUBLIC SIDEWALK (NO CHARGE) N/C

PARKING LOT-per 50 spaces or fraction thereof FEE \$75.00

NOTE: UNLESS OTHERWISE APPROVED, ALL APRONS MUST BE WHOLLY OF CONCRETE AND ALL CONCRETE FOR ABOVE WORK FOR WHICH A PERMIT IS ISSUED, IS TO BE A MINIMUM SIX AND ONE HALF, (6-1/2) SACK MIX.

TWENTY-FOUR (24) HOUR NOTICE IS REQUIRED PRIOR TO REPLACEMENT OF CONCRETE TO SCHEDULE AN INSPECTION

By signing as the applicant I am acknowledging that I am authorized to pull this permit for the Company listed above. (Homeowner affidavit must be signed/witnessed at the Building Department if homeowner is doing work listed above.

Signature of Applicant Address of Applicant Date

Printed Name of Applicant Phone Number