



CITY OF LORAIN
DIVISION OF BUILDINGS
**1,2,3 FAMILY FOUNDATION REPAIR/
REPLACEMENT WATERPROOFING
PERMIT APPLICATION**

Phone: 440-204-2045 / Fax: 440-204-2540
Richard Klinar, Chief Building Official

Date :	_____
Valuation \$	_____
Permit Fee \$	_____
1% State \$	_____
3% State \$	_____
Total Fees \$	_____
<input type="checkbox"/> Cash <input type="checkbox"/> Check #	_____
Permit: #	_____

CONTRACTOR _____ PHONE _____
 NAME OF OWNER _____ PHONE _____
 JOB SITE ADDRESS _____

RESIDENTIAL COMMERCIAL NO. OF DWELLING UNITS? _____ OWNER OCCUPIED: YES NO

It is the applicants responsibility to complete this application and provide all required drawings/If you haven't the ability to do so, please consult someone who does.

**NOTE: For foundation REPAIRS and WATERPROOFING complete A & B.
For REPLACEMENT WALLS complete the entire application.**

A. Areas involved in repair/replacement (Describe work to be completed): _____

B. Size and type of footer tile _____ Type and depth of stone-fill _____
 Will footer water discharge by gravity or by sump pump Will the existing path of discharge be altered Yes No
 If "YES", explain _____

NOTE: A SUMP PUMP DISCHARGE MUST BE CONNECTED TO THE CITY STORM SEWER IF AVAILABLE, UNLESS OTHERWISE APPROVED BY THE CITY.

C. Submit a detailed cross-sectional drawing of the footer, wall, sill plate, anchor bolts, tile, stone fill, method of sealing the wall, and identify all materials and dimensions OR complete the following:
 Footer thickness _____ Footer width _____ Footer depth below grade _____
 Foundation material _____ Size of sill plate _____
 Type of anchorage _____ Size and number of windows to be replaced _____
 (AREAS BELOW GRADE MUST BE VENTILATED); Column pad thickness and width _____

All foundation drainage within the City of Lorain shall be installed according to CABO Building Code, Section 405. In no case shall drains be permitted to discharge into the sanitary sewer.

If during the course of construction, a connection pipe to the sanitary sewer is exposed, the cross connection must be removed and the water from footings drains shall be mechanically removed by pumping it to an approved outlet. The owner/or contractor are responsible for requesting an inspection before covering of concealing any work and shall inform the City of Lorain of any exposed cross connections.

WARNING: BEGINNING WORK WITHOUT PERMIT IN HAND SHALL RESULT IN A DOUBLE FEE PAYMENT

I CERTIFY THAT I AM THE OWNER OF THE ABOVE PROPERTY, THAT THE ABOVE STATEMENTS ARE TRUE AND THAT THE WORK WILL BE PERFORMED ONLY BY MYSELF, PER ORD. 118-96, SECTION III - 1.

Owner

I CERTIFY THAT I AM AUTHORIZED BY THE OWNER OF THE ABOVE PROPERTY TO OBTAIN THE DESCRIBED PERMIT; THAT THE ABOVE STATEMENTS ARE TRUE AND THAT THE WORK WILL BE PERFORMED BY CONTRACTOR (S) WHO IS/ARE REGISTERED WITH THE CITY OF LORAIN BUILDING DEPARTMENT.

Authorized Representative