

# Commercial Permit Application

# Part B supplement to Part A

P&D Time Stamp Below



CITY OF KETTERING

Planning and Development Department  
3600 Shroyer Road • Kettering, Ohio 45429  
937-296-2441 • fax 937-296-3240

For Office Use Only

Permit Number: \_\_\_\_\_

Related permit or project \_\_\_\_\_

Revised January 2004

**Please print clearly**  **Kettering**  **Oakwood**

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Building Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_

Ohio Architect/Engineer: \_\_\_\_\_ Reg/Lic # \_\_\_\_\_

Architect/Engineer Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Construction Type**

Existing Construction Type \_\_\_\_\_

**New/Proposed Construction Type**

Type 1 A    Type 2 A    Type 3 A    Type 4 A    Type 5 A

Type 1 B    Type 2 B    Type 3 B    Type 4 B    Type 5 B

**Use and Occupancy (check all that apply)**

Existing Use/Occupancy Group \_\_\_\_\_

**New/Proposed Use Group**

Assembly  A1    A2    A3    A4    A5

Business  B

Educational  E1

Factory  F1    F2

High Hazard  H1    H2    H3    H4    H5

Institutional  I1    I2    I3    I4

Mercantile  M

Residential  R1    R2    R3    R4

Storage  S1    S2

Utility  U

Daycare  A3    E    I1    I4    R3

**Multiple Use Groups (Select how they are treated)**

Mixed Use Non-Separated    Mixed Use Separated

Separate Buildings    Unlimited Area

**Fire Protection Systems**

**Sprinklers:**  Full NFPA 13    Limited Area    Hood

Other Sprinkler \_\_\_\_\_

**Alarm:**  Automatic    Manual    Access Control

**Scope of Work**

New Building

Addition/Repair/Remodel

Certificate of Occupancy

Accessory Structure

Interior Alteration

Other \_\_\_\_\_

**Building Height and Area Limits**

	Allowable Height	Actual Height
Feet	_____	_____
Stories	_____	_____

**Area Calculation**

	Allowable Area	Actual Area
Base Tabular Area (sf)	_____	_____
Street Frontage Increase	_____	_____
Sprinkler System Increase	_____	_____
Total Area (sf)	_____	_____
Construction Area (sf)	_____	_____

**Maximum Occupant Load**

Design occupant load for building or tenant space \_\_\_\_\_

Indicate occupant loads for spaces **E** and **A** on drawings

**Other Plan Reviews Requested**

HVAC    Electric

Plumbing    Fire

Hood    Gas

Other \_\_\_\_\_