



# CITY OF BRYAN, OHIO BUILDING DEPARTMENT

1399 E. High St.  
P.O. Box 190  
Bryan, Ohio 43506  
Phone: 419-633-6013  
Fax: 419-633-6015

## WORK PERMIT APPLICATION COMMERCIAL & INDUSTRIAL

*NO WORK SHALL BE STARTED PRIOR TO THE APPROVAL OF THIS APPLICATION. ALL CONTRACTORS MUST BE ON FILE WITH THE CITY OF BRYAN INCOME TAX DEPARTMENT BEFORE A PERMIT WILL BE ISSUED. CONTACT KAY REYNOLDS AT 419-636-0772 FOR TAXES. IT IS THE GENERAL CONTRACTORS RESPONSIBILITY TO REPORT ALL SUBCONTRACTORS TO THE INCOME TAX DEPARTMENT. IF ANY CONTRACTOR IS FOUND ON SITE THAT IS NOT ON FILE WITH THE TAX DEPARTMENT, A STOP WORK ORDER WILL BE ISSUED IMMEDIATELY.*

DATE: \_\_\_\_\_

PARTIAL PERMIT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_

FINAL PERMIT NUMBER: \_\_\_\_\_

### PROPERTY INFORMATION:

OWNER NAME: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### CONTRACTOR INFORMATION:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

### CONSTRUCTION INFORMATION:

ZONE: \_\_\_\_\_ NUMBER OF LIVING UNITS: \_\_\_\_\_ STATE CONSTRUCTION TYPE: \_\_\_\_\_ STATE USE GROUP: \_\_\_\_\_

CONSTRUCTION COST: \_\_\_\_\_ SQ. FT. OF NEW BUILDING \_\_\_\_\_

ADDITIONAL INFORMATION: \_\_\_\_\_

PARTIAL PERMIT SIGNATURES

FINAL PERMIT SIGNATURES

COUNCIL SIGNATURES

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Applicant

\_\_\_\_\_

\_\_\_\_\_  
Fire Department

\_\_\_\_\_  
Fire Department

\_\_\_\_\_

\_\_\_\_\_  
Zoning Administrator

\_\_\_\_\_  
Zoning Administrator

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Council Approval \_\_\_\_\_