



## WOOD COUNTY BUILDING INSPECTION

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### COMMERCIAL BUILDING PERMIT APPLICATION

Name of Facility \_\_\_\_\_ County \_\_\_\_\_

Zoning Permit No. \_\_\_\_\_

Site Address \_\_\_\_\_ City/Township \_\_\_\_\_

Located N S E W side, between \_\_\_\_\_ and \_\_\_\_\_

Owner \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Designer/Architect/Engineer \_\_\_\_\_ Phone \_\_\_\_\_

Type of Construction \_\_\_\_\_ Use Group \_\_\_\_\_ No. of Units \_\_\_\_\_

Description of Work \_\_\_\_\_ New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_

SQUARE FOOTAGE	New	Addition	Alteration
Basement _____		Base Fee	\$ 125.00
First Floor _____		\$.12 Per Sq. Ft. (Minimum 100 Sq. Ft.)	\$ _____
Second Floor _____		Plan Review \$125 PLUS \$.02 per Sq. Ft.	\$ _____
Third + Floor _____		Cert. of Occupancy/Cert. of Completion	\$ \$75
TOTAL SQ. FT. _____		Temporary Occ. \$75 (If applicable)	\$ _____
Estimated Construction Cost _____		SUBTOTAL	\$ _____
		Add 3% State Fee	\$ _____
		<b>TOTAL</b>	<b>\$ _____</b>

Signature: **X** \_\_\_\_\_

Print Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

Phone No. \_\_\_\_\_

Date: \_\_\_\_\_

File No. \_\_\_\_\_

The undersigned hereby makes application for the construction, installation, replacement or alteration as herein specified, agreeing to do all such work in strict accordance with the 2024 Ohio Building Code and Wood County Regulations, and to save Wood County, Ohio harmless from any and all damages. I understand that the permit issued as a result of this application will expire within one (1) year from issue date if the work has not commenced or lack of any progress.