



Grove City Building Division
 4035 Broadway
 Grove City, OH 43123
 614-277-3075 (Phone)
 614-277-3090 (Fax)
 GroveCityOhio.gov

GENERATOR PERMIT APPLICATION

Return form by: Fax Email Pickup Call

Permit No. _____

PROPERTY INFORMATION

Address _____ *Grove City, OH 43123* Subdivision _____
 Parcel I.D. _____ Lot/Unit/Suite/Building _____ Zoning _____

OWNER INFORMATION

Name _____ Phone _____
 Address _____ Email _____

PROJECT INFORMATION

Description _____
 Commercial Residential Electric Plumbing

FEES

| | | | |
|---|----|-------|--------|
| Electric | \$ | _____ | 50.00 |
| Plumbing | \$ | _____ | 50.00 |
| HVAC | \$ | _____ | 50.00 |
| Diesel | \$ | _____ | 100.00 |
| Subtotal | \$ | _____ | |
| State Fee | \$ | _____ | |
| <small>1% Residential 3% Commercial</small> | | | |
| Total Fees Due \$ | | _____ | |

ADDITIONAL INFORMATION

ELECTRIC

Load Calculations _____

Kilowatts _____

PLUMBING/GAS LINE

Load Calculations _____

BTUs/Hour _____

SUBMITTAL REQUIREMENTS

2 sets of the following:

- Site plan, Manufacturer's specifications
- Gas company upgrade approval
- Calculations must be shown along with the method used to determine the calculations

OFFICE USE

Receipt No. _____
 Check No. _____
 Date Entered _____
 Date Issued _____
 Approved _____ Date _____

Re-Inspection fee for disapproved inspection: Residential: \$50 Commercial: \$100

FINAL INSPECTION REQUIRED

CONTRACTOR INFORMATION

Electric Plumbing HVAC Registration No. _____

Contractor _____ Contact _____
 Address _____
 Phone _____ Fax _____ Email _____
 Signature _____ Owner Agent

CONTRACTOR INFORMATION

Electric Plumbing HVAC Registration No. _____

Contractor _____ Contact _____
 Address _____ City/State/Zip _____
 Phone _____ Fax _____ Email _____
 Signature _____ Owner Agent

24-Hour Inspection Line: 614-277-1815

For next business day inspections, requests must be called in before noon or contractors may use the online inspection service as late as 8 p.m., seven days a week.

Revised 1/2017