# VILLAGE OF HARTVILLE RESIDENTIAL BUILDING DEPARTMENT Office 330-877-9778

#### **APPLICATION PROCEDURES:**

ALL CONTRACTORS MUST BE REGISTERED WITH THE VILLAGE OF HARTVILLE BEFORE ANY PERMITS CAN BE ISSUED.

This is a brief overview of what you will need to make an application for a building permit:

- 1. Complete Zoning Permit and Contractor Registration Application.
- 2. Two (2) sets of 11 x 17 plans (1/8" scale) which will include a site plan showing the property address, location of existing house and proposed location of structure. Indicate the distance of the structure from the rear and side property lines, as well as the measurements of the structure.

One (1) set of plans will be returned to you once they have been reviewed.

<u>Please include utility connections, existing and proposed grading, driveways, downspouts connections, storm structures and ditches.</u>

- 3. Building Application must include the square footage and cost of the project.
- 4. New Homes Must submit a completed MEC (Model Energy Code) or Energy Trade off Worksheet. Located at www.hartvilleoh.com / forms and permits / Building Department Forms / Residential Ohio Energy Code Requirements

FEES: See attached fee schedule

#### INSPECTIONS:

- \* POOL INSPECTION: Above ground and in-ground pools requires just a final inspection.
- \* FOOTER (POSTHOLE) INSPECTION: On pole barns, decks & replacements porches (min. depth from bottom of footer to grade is 38")
- \* FOUNDATION INSPECTION: After the foundation has been constructed and coated, drainage tiles in place, **BUT** before backfilling.
- \* ROUGH BUILDING (HEATING IF NEEDED): Done <u>AFTER ALL</u> other rough inspections (plumbing and/or electric) are completed
- \* INSULATION INSPECTION (IF NEEDED): Made after rough Building is approved. All insulation which will be covered, shall be installed with appropriate vapor barriers; air infiltration shall be complete.
- \* FINAL BUILDING INSPECTION (HEATING IF NEEDED): Done **AFTER ALL** other inspections (plumbing and/or electrical) are completed, BUT prior to occupancy.

<u>BUILDING INSPECTION FEES</u>—Take the square footage off the "building permit" to determine fees. (Single family and Two-Three family homes include square footage of garage, deck, porches and <u>basement</u>—ONLY IF FINISHED)!

Any permit issued shall automatically expire one year from its issuance, unless work has commenced under the permit.

#### **FEE SCHEDULE:**

Single Family – \$100.00 permit fee plus \$0.10 per sq. ft. x 1% State Fee

**Two-Three Family** – \$100.00 permit fee plus \$0.10 per sq. ft. x 1% State Fee

Separate permits for each unit.

Plan review fee: \$75.00 Each Additional Review: \$30.00

Additions, Alterations,

**Structures & Detached Garages** \$50.00 permit fee plus \$0.10 per sq. ft. x 1% State Fee

Plan review fee: \$40.00 Each Additional Review: \$30.00

#### \*\*\*\*\*TO CALCULATE FEES USE THE EXAMPLE BELOW:

\*\*\*EXAMPLE: Square footage 3400 x \$0.10 = \$340.00 + \$100.00 = \$440.00 x 1% = \$444.40

Plan review fee added after the 1% \$444.40 + \$75.00 = \$519.40 due

#### Decks, Roofs/Re-roofs, Pools

\*\*NOTE – Decks not exceeding 200 sq. ft in area and are not more than 30 inches above grade and <u>ARE NOT ATTACHED</u> to a dwelling and do not service the exit door are not required to pull a permit.

\$50.00

No State Fee is required

Accessory Buildings (Sheds/Pergolas)

No Permit / No State Fee is required

non foundation up to 100 sq. ft

(Pergolas only have open slat roofs)

Accessory Buildings (Sheds/Pergolas) \$40.00 No State Fee is required

non foundation/foundation 101 sq. ft or more

<u>Siding</u> – NO PERMIT REQUIRED

<u>Demolition</u> \*\*NOTE – make sure they apply for the \$35.00 No State Fee is required

sewer disconnection form and pay for it

Reinspections – The Village allows so many inspections to be done.

Additional inspections are considered a reinspection.

(Footer, Foundation, Rough, Insulation & Final) \$30.00 No State Fee is required

<sup>\*\*</sup>NOTE: No Permits for fences, patios or concrete drives (Road opening only on drives)

# APPLICATION FOR RESIDENTIAL BUILDING PERMIT

(1, 2, & 3-Family Dwelling Units)

# Village of Hartville Building Department 202 W. Maple Street

| Hartville, OH 44632 Permit/Plan Exam #: |   | Plan Exam #:                          |                                       |  |  |
|---|---|---------------------------------------|---------------------------------------|--|--|
| 330-877-9222<br>www.hartvilleoh.com     |   |                                       |                                       |  |  |
| Fee \$ x 1                              | %=(See Attach                           | ned Fee Schedule) Date                | 20                                    |  |  |
| Description of Work (RC                 | O 107.2.1):                             |                                       |                                       |  |  |
| Project Location Addres                 | ss:                                     |                                       | , Hartville, Ohio                     |  |  |
| Estimated Cost of Proje                 | ct: \$                                  |                                       |                                       |  |  |
| Zoning Permit No                        | s                                       | anitary Permit No.                    |                                       |  |  |
| Area Space: (Round up                   | to nearest 100 sq. ft.)<br>Second Floor | Basement (if finished)                | )                                     |  |  |
| Garage                                  | _ Deck/Porch                            | Other:                                |                                       |  |  |
| Total Ar                                | ea Space:                               |                                       |                                       |  |  |
| Type of Improvement:                    |   |                                       | ☐ Garage/Pole Bldg. ☐ Roof<br>☐ Other |  |  |
| Registered Design Profession            | onal – If Applicable: (RCO 1            | 06.1.1-3, 106.2) Designer:            | Reg./Cert./#                          |  |  |
| Property Owner:                         |   | Contractor:                           |                                       |  |  |
| Address:                                |   |                                       |                                       |  |  |
| City:                                   | State/Zip:                              |                                       | State/Zip:                            |  |  |
| Owner's Phone:                          |   | Contractor's Phone                    | e:                                    |  |  |
| Email:                                  |   | X                                     | Signature of Applicant                |  |  |
|   |   |                                       | Signature of Applicant                |  |  |
| Foundation Inspection:                  | Date:                                   | Insulation Inspection:                | Date                                  |  |  |
| Inspector:                              | <del> </del>                            | Inspector:                            |                                       |  |  |
| Rough Inspection: Date                  | e:                                      | Final Inspection: Date                |                                       |  |  |
| Inspector:                              |   | Inspector:                            |                                       |  |  |
| Other Inspection: Date:                 |   |                                       |                                       |  |  |
| Inspector:                              |   |                                       |                                       |  |  |
| Re-Inspections:                         |   | · · · · · · · · · · · · · · · · · · · |                                       |  |  |
| Inspector's Notes:                      |   |                                       |                                       |  |  |

#### Contractor/Subcontractor Registration Application:

All contractors/subcontractors must submit an application for contractor registration.

Initial Application: \$75.00

Annual Renewal: \$50.00 (if registered the previous year)

The following must be returned with the application for approval: Certificate of Liability (\$1,000,000.00) listing the Village of Hartville as the Certificate Holder, along with the Surety Bond (\$10,000.00).

All paperwork will be submitted to the: Village of Hartville

202 W. Maple Street Hartville, Ohio 44632

\*\*\*Please note, the Village of Hartville will no longer mail out a copy of the license. If you would like to receive a copy, please provide a self-addressed stamped envelope along with your application.

Office hours are Monday, Tuesday, Wednesday, and Fridays 8 a.m. to 4:30 p.m. with the exceptions of Thursday, the office is opened from 8 a.m. to Noon.

### VILLAGE OF HARTVILLE 202 W. MAPLE STREET, P.O. BOX 760 HARTVILLE, OH 44632

330-877-9222 FAX 330-877-9778

www.hartvilleoh.com

#### CONTRACTOR/SUBCONTRACTOR REGISTRATION APPLICATION

| Date  |  |  |  |
|---|--|--|--|
| □ New Registration (\$75.00) □ Renewal  | (\$50.00 - if registered the previous year)    |  |  |
| Name  | Phone  |  |  |
| Company Name  | Phone  |  |  |
| Address   | City/State/Zip                                 |  |  |
| FED ID or SSN   | Email  |  |  |
| TYPE OF REGISTRATION:   |  |  |  |
| General - Please circle (Excavation, Foundation, Masonry, Insulation, Roofing, Drywall, Siding, Landscaping, Painting, Carpentry, Other                         |  |  |  |
| Address of Project location:  |  |  |  |
| INSURANCE INFORMATION:  |  |  |  |
| Insurance Company & Agent   |  |  |  |
| Insurance Co. Address   | Phone  |  |  |
| Expiration Date of Policy   |  |  |  |
| Note: A current copy of Liability Insurance (\$1,00 certificate holder, Surety Bond (\$10,000), and Sta and kept on file in the Building Department of the      | te License, (if applicable), must be submitted |  |  |
| Do you have subcontractors? ☐ Yes ☐ No (I Contractor Registration Form.)  | f yes, each subcontractor must complete a      |  |  |
| Will your company be withholding local income tax fr (All Businesses are required to submit copies of IRS Department within 3 ½ months after the end of the tax | Forms 1099-MISC to Hartville Income Tax        |  |  |

The Village of Hartville is an equal opportunity provider.

Please list your subcontractor information on the following page.

#### **Village of Hartville Income Tax Department**

202 W Maple St PO Box 760 Hartville OH 44632

Phone: 330-877-9222 Fax: 330-877-9778

#### **CONTRACTOR LISTING**

| TYPE                   | SUBCONTRACTOR | FULL ADDRESS | PHONE # |
|------------------------|---------------|--------------|---------|
|                        |               |              |         |
| EXCAVATION             |               |              |         |
| FOUNDATION             |               |              |         |
|                        |               |              |         |
| MASONRY                |               |              |         |
| STRUCTURAL CARPENTRY   |               |              |         |
| ELECTRICAL             |               |              |         |
| PLUMBING               |               |              |         |
| HVAC                   |               |              |         |
| INSULATION             |               |              |         |
| ROOFING                |               |              |         |
| DRYWALL                |               |              |         |
| FINISHING<br>CARPENTRY |               |              |         |
| SIDING                 |               |              |         |
| LANDSCAPING            |               |              |         |
| PAINTING               |               |              |         |
| OTHER                  |               |              |         |

### Village of Hartville

202 W Maple St
PO Box 760Hartville, OH 44632
Phone 330-877-9222 Fax 330-877-9778

aphillips@hartvilleoh.com

#### **INCOME TAX DEPARTMENT**

#### **CONTRACTOR & SUBCONTRACTOR TAX INFORMATION**

#### **ANNUAL TAX RETURN FILING**

The Village of Hartville has a **mandatory** Income Tax filing for a business entity, whether resident or non-resident who conducts business in the Village of Hartville. An annual return must be filed and tax paid on the net profit. If you have a net loss you are still required to file a return.

The tax rate for Hartville is 1.5%. The yearly filing or request for an extension deadline is April 15<sup>th</sup>. Failure to file or request an extension on or before the April 15<sup>th</sup> due date will result in a \$25.00 late filing penalty.

Tax forms can be obtained on our Website at www.hartvilleoh.com.

#### **EMPLOYEE WITHHOLDING**

Each employer within or doing business within the Village of Hartville shall deduct at the time of the payment of such salary, wage, commission or other compensation, the tax of one percent (1.5%) of the gross salaries, wages, commission or other compensation due by the said employer to said employee and shall on or before the 15th day of the month following the close of each calendar quarter make a return and pay to the Village of Hartville Tax Administrator the amount of taxes so deducted. Such employer shall be liable for the payment of the tax required to be deducted and withheld, whether or not such taxes have in fact been withheld.

<u>Please complete the enclosed CONTRACTORS AND SUB-CONTRACTORS BUSINESS REGISTRATION FORM</u> and return by mail, fax or email within 10 business days.

Your cooperation is greatly appreciated. If you have any questions, please contact the income tax department.

Angela Phillips Tax Clerk aphillips@hartvilleoh.com

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# Village of Hartville

202 W Maple St PO
Box 760
Hartville, OH 44632
Phone 330-877-9222 Fax 330-877-9778
aphillips@hartvilleoh.com

# **Income Tax Department Business Registration**

To enable the Village of Hartville Income Tax Department to establish accurate records, please answer all questions and return by mail, fax or email.

| ACCT #                   |   | <u> </u>                         |  |
|--------------------------|---|----------------------------------|--|
| Business Name: _         |   |                                  |  |
| Business Address         | :   |                                  |  |
| Date Business Sta        | rted in Hartville:                                      | Phone #:                         |  |
| Tax ID/S.S. #:           | Accountin   | ng period: Calendar Year         | Fiscal Year Ending   |
|                          | annual year-end filing form send pre-printed annual yea |                                  |  |
|                          | EMPLOY  | EE WITHHOLDING (if applic        | able)  |
| Employee Withholdi       | ng is submitted: Monthly                                | Quarterly Num                    | ber of Employees:  |
| Please check one:        | pre-printed withholding for                             | ms are not necessary, use in-hou | ise software system  |
| _                        | use third party Payroll Com                             | pany - Name:                     |  |
| _                        | send pre-printed withholdin                             |                                  |  |
|                          | S   |                                  | g from home. FTHybrid  |
| If Hybrid, how m         | any days in Hartville per v                             | veek                             |  |
|                          |   |                                  | or email   |
| attributable to Harty    |   | sub-contractors, or others who   | all earned income, including net profits<br>have one or more employees are required to<br>f Hartville. |
| The information hereby s | ubmitted is true and correct                            |                                  |  |
| Signed                   |   | Date                             |  |