

APPLICATION FOR RESIDENTIAL BUILDING PERMIT
(1, 2, & 3-Family Dwelling Units)

Village of Hartville Building Department
202 W. Maple Street
Hartville, OH 44632
330-877-9222
www.hartvilleoh.com

Permit/Plan Exam #: _____

Fee \$ _____ x 1% = _____ (See Attached Fee Schedule) Date _____ 20 _____

Description of Work (RCO 107.2.1): _____

Project Location Address: _____, Hartville, Ohio

Estimated Cost of Project: \$ _____

Zoning Permit No. _____ Sanitary Permit No. _____

Area Space: (Round up to nearest 100 sq. ft.)

First Floor _____ Second Floor _____ Basement (if finished) _____

Garage _____ Deck/Porch _____ Other: _____

Total Area Space: _____

Type of Improvement: New Building Alter/Remodel Addition Garage/Pole Bldg. Roof
 Deck Accessory Bldg/Shed Demolition Other _____

Registered Design Professional – If Applicable: (RCO 106.1.1-3, 106.2) Designer: _____ Reg./Cert./# _____

Property Owner: _____ Contractor: _____

Address: _____ Address: _____

City: _____ State/Zip: _____ City: _____ State/Zip: _____

Owner's Phone: _____ Contractor's Phone: _____

Email: _____ X _____

Signature of Applicant

Foundation Inspection: Date: _____ Insulation Inspection: Date _____

Inspector: _____ Inspector: _____

Rough Inspection: Date: _____ Final Inspection: Date _____

Inspector: _____ Inspector: _____

Other Inspection: Date: _____

Inspector: _____

Re-Inspections: _____

Inspector's Notes: _____

STORM WATER RUN-OFF APPROVAL
By Village Engineer
Sanitary Hookup Approval
By Board of Public Affairs
Lateral Installation Inspection
By Sewer Inspector

VILLAGE OF HARTVILLE, OHIO
ZONING DEPARTMENT
**APPLICATION for
ZONING PERMIT**

Zoning Permit No. _____

Date Issued _____

SANITARY DISCHARGE APPROVAL
BY BOARD OF PUBLIC AFFAIRS

Date _____

A scale plan must be submitted with this application showing the size and location of the Lot, the dimensions and location of the proposed building or structure on the lot and the dimensions and location of existing buildings or structures on the lot.

Name of Applicant _____ Phone _____

Address _____

Owner of Premises _____ Address _____

Application is hereby made to: (Description of Work) _____

To be used for (Indicate purpose, number of units or offices, etc.) _____

On premises located at _____

DESCRIPTION

(1) Size of lot: _____ feet wide _____ feet deep

(2) Size of building or structure: Floor area _____

Maximum: Width _____ ft. Depth _____ ft.

Height: Stories _____; feet _____

(3) Location on Property:

Proposed Yards

FRONT _____ ft. from Property Line to Building or Structure.

SIDE _____ ft. from Property Line to Building or Structure.

SIDE _____ ft. from Property Line to Building or Structure.

REAR _____ ft. from Property Line to Building or Structure.

(4) Character of Construction _____

(Brick, Frame)

(5) Estimated Cost of Work \$ _____

(6) Present use of Land, Existing Buildings or Structures on Lot: _____

Signature of Applicant

Please note any additional information on separate sheet and attach to this form.

CERTIFICATION OF ZONING INSPECTOR'S EXAMINATION

I have examined the foregoing application, plans and information, found them not / to conform with the zoning requirements and grant / refuse them a Zoning Permit.

By _____ Date _____

SAMPLE SITE PLAN

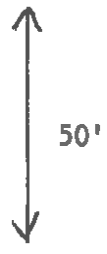
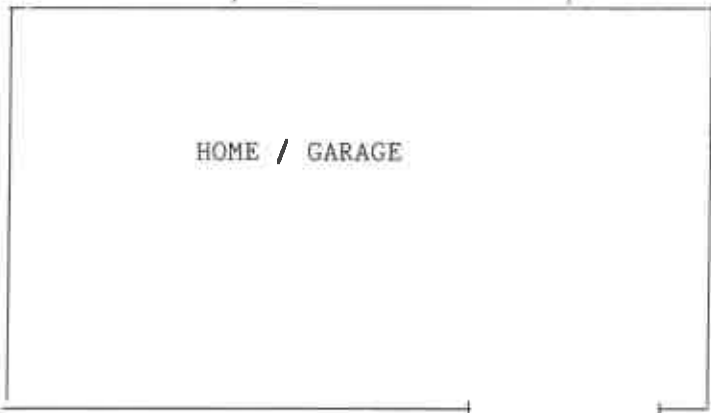
(- - - - - FENCE)

PROPERTY LINE 80'



ALLEY

PROPERTY LINE 148'



NAME OF STREET

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 REGISTRATION APPLICATION

Date _____

New Registration (\$60.00) Renewal (\$40.00 - if registered the previous year)

Name _____ Phone _____

Company Name _____ Phone _____

Address _____ City/State/Zip _____

FED ID or SSN _____

TYPE OF REGISTRATION:

General- Please circle (Excavation, Foundation, Masonry, Insulation, Roofing, Drywall, Siding, Landscaping, Painting, Carpentry, Other _____) HVAC Electrical Sewer

Address of Project location: _____

INSURANCE INFORMATION:

Insurance Company & Agent _____

Insurance Co. Address _____ Phone _____

Expiration Date of Policy _____

Note: A current copy of Liability Insurance (\$1,000,000) naming the Village of Hartville additional Insured, Contractor License Bond (\$10,000), and State License, (if applicable), must be submitted and kept on file in the Building Department of the Village of Hartville, or registration is void. (This is the responsibility of the Contractor.)

Do you have subcontractors? Yes No (If yes, each subcontractor must complete a Contractor Registration Form.)

Will your company be withholding local income tax from all employees on the job? Yes No
(All Businesses are required to submit copies of IRS Forms 1099-MISC to Hartville Income Tax Department within 3 ½ months after the end of the tax year.)

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 CARPENTRY			
SIDING			
LANDSCAPING			
PAINTING			
OTHER			

Village of Hartville
202 W Maple St
PO Box 760 Hartville, OH 44632
Phone 330-877-9222 Fax 330-877-9778
tcooper@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%. The yearly filing or request for an extension deadline is April 15th. Failure to file or request an extension on or before the April 15th 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%) 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.

Please complete the enclosed CONTRACTORS AND SUB-CONTRACTORS BUSINESS REGISTRATION FORM 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.

Tanya Cooper
Income Tax Clerk
tcooper@hartvilleoh.com

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

**Income Tax Department
Contractor and Sub-Contractor Business Registration**

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

ACCT # (to be assigned upon receipt)

Business Name: _____

Business Address: _____

Phone #: _____ Tax ID/S.S. #: _____

Job Name & Location: _____

Date Job Started: _____ Estimated Length of Job in days: _____ (mandatory)

Please check one: annual year-end filing forms are not necessary, use a professional tax service
 send pre-printed annual year-end filing forms to:

Please check one: pre-printed withholding forms are not necessary, use in-house software system
 use a third party Payroll Company – Name: _____
 send pre-printed withholding forms to: _____

The Village of Hartville imposes an income tax at the rate of one percent (1%) on all earned income, including net profits attributable to Hartville. All employers, contractors, sub-contractors, or others who have one or more employees are required to withhold 1% of all employees' gross wages and submit this amount to the Village of Hartville.

The information hereby submitted is true and correct

Signed _____

Date _____