



Village of Walton Hills
7595 Walton Road • Walton Hills Ohio, 44146
Phone (440)232-7800 • FAX (440) 232-4070
www.waltonhillsohio.gov

PERMIT APPLICATION
(Use one for each type of permit)

PLEASE CHECK TYPE OF PERMIT

Building Accessory Building Curb Cutting Culvert Deck
 Doors/Gutters/Siding/Windows(Circle One) Driveway (Concrete/Asphalt) Electrical Fence
 HVAC Patio Plumbing Retaining Wall Roof Sign Swimming Pool Tree Removal
 Walkway Waterproofing
 Residential or Commercial (Please check one)

Date: _____ **Estimated Cost:** _____ **Sq. Footage:** _____

Project Information:

Project Address: _____

Property Owner Name: _____

Property Owner Address (if different): _____ Phone No: _____

Description of Project: _____

Contractor Information:

General Contractor Name: _____

Address/Street: _____ Phone No: _____

City: _____ Zip: _____ Fax No: _____

AUTHORIZATION:

The undersigned states that he/she is the owner of the property or authorized agent for the owner of the project address.

1. This permit is granted on condition that all work is done according to the ordinances of the Village of Walton Hills, and all Building Code Laws of the State of Ohio and/or of the Village of Walton Hills and any restrictions. On failure to do so, this permit may be revoked and/or fines and penalties may be imposed. The Village of Walton Hills Building Department does not enforce deed restrictions, covenants or subdivision regulations.
2. This permit holder or his agent shall notify the Building Division 24 hours in advance for inspection.

Applicant Signature: _____ **Date:** _____

IMPORTANT NOTICE TO HOMEOWNERS: IF YOU OBTAIN THIS PERMIT ON THE BEHALF OF A CONTRACTOR, YOU ARE LIBABLE FOR ALL WORK INCLUDING ANY VIOLATIONS OR UNFINISHED WORK. CONTRACTORS MUST BE CERTIFIED AND CURRENTLY REGISTERED WITH THE VILLAGE.