

**VILLAGE OF CHAGRIN FALLS ARB APPLICATION**

Phone # 440.247.5050  
Fax # 247- 2082

Separate application is required for building permits

<b>Office Use</b> ARB # _____ H.R. # _____ Prelim Review _____ Final review _____ Demo Exp: _____
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**ARB Filing fee required on all submission: Residential additions: (499 sqft. < \$30.00) (499 sq.ft. > \$55.00)  
Detached Garage: (\$15.00 499 Sqft. <) (\$20.00 500 sqft. >) (New dwellings: \$95.00)**

**SUBMISSION DEADLINE 12:00 NOON (3) complete sets of drawings & electronic submission required**

**Structures over 50 years require a Historical review \$200.00 filing fee. 20 day submission deadline is required for all Historic reviews.**

**Demolition requires notice,\$500 filling fee, 20 day submission deadline for ARB. Upon approval 30 day hold before permit is issued**

**Submitting for:**

**Date of application:** \_\_\_\_\_

- New dwelling  Addition  Accessory Structure, (detached garage)  Attached garage  Porch  Siding  Demolition of buildings  
 Moving of buildings  Other: \_\_\_\_\_

**Contact information:**

Property owner: \_\_\_\_\_ Address: \_\_\_\_\_ Ph# \_\_\_\_\_

E- Mail address: \_\_\_\_\_ Permanent Parcel Number: \_\_\_\_\_

Zoning Classification: \_\_\_\_\_

Presenting design professional: \_\_\_\_\_ Phone No. \_\_\_\_\_

E-Mail address: \_\_\_\_\_

**Existing information**

Construction: \_\_\_\_\_ Roof type: \_\_\_\_\_ Predominate roof pitch: \_\_\_\_\_ Stories: \_\_\_\_\_ Type of existing siding: \_\_\_\_\_

Existing Trim: \_\_\_\_\_ Existing height: \_\_\_\_\_ Age of existing: \_\_\_\_\_

Has there been any additions to subject property?: \_\_\_\_\_ If yes, what year were they added: \_\_\_\_\_

**(Existing) finished space square footage which includes, crawl space, attic space & attached garage:**

Basement	1 <sup>st</sup> floor	2 <sup>nd</sup> floor	3 <sup>rd</sup> floor	Attic	Garage	<b>Total</b>
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**Proposed building information:**

Bldg. construction: \_\_\_\_\_ Proposed height: \_\_\_\_\_ Roof type: \_\_\_\_\_ Predominate roof pitch: \_\_\_\_\_ Stories: \_\_\_\_\_

Proposed siding: \_\_\_\_\_ Proposed trim: \_\_\_\_\_

Proposed Foundation: \_\_\_\_\_ Roof type: \_\_\_\_\_ Roof pitch: \_\_\_\_\_ Stories: \_\_\_\_\_

**(Proposed) finished space square footage which includes, crawl space, attic space & attached garage:**

Basement	1 <sup>st</sup> floor	2 <sup>nd</sup> floor	3 <sup>rd</sup> floor	Attic	Garage	<b>Total</b>
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**Lot coverage of finished space square footage includes attached garages, enclosed porches :**

<b>Existing</b>	<b>Proposed</b>	<b>Total combined</b>	<b>Sq. Ft of Lot</b>	<b>Lot coverage</b>	<b>%</b>
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Signature of property owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of person submitting \_\_\_\_\_ Date: \_\_\_\_\_

Office use: