

# RESIDENTIAL CO REQUEST



DIVISION OF BUILDING STANDARDS  
COUNTY OF SUMMIT ♦ EXECUTIVE ILENE SHAPIRO  
1030 E. TALLMADGE AVENUE ♦ AKRON, OHIO 44310  
330.630.7280 ♦ FAX: 330.630.7296  
buildingstandards.summitoh.net

\_\_\_\_\_

DATE

|             |        |           |           |
|-------------|--------|-----------|-----------|
| OWNER       |        |           |           |
| ADDRESS     | STREET | CITY/TOWN | STATE ZIP |
| TELEPHONE # | CELL # | E-MAIL    |           |

**ATTENTION:** Chief Building Official  
County of Summit ♦ Building Standards Division  
1030 East Tallmadge Ave. ♦ Akron, Ohio 44310

**REGARDING:** Owners request for a Residential (One-Two or Three-Family Dwelling unit) Certificate of Occupancy for an existing building located at:

|                          |        |                       |            |     |
|--------------------------|--------|-----------------------|------------|-----|
| ADDRESS                  | STREET | CITY/TOWNSHIP/VILLAGE | STATE      | ZIP |
| PROPOSED USE OF BUILDING |        |                       | FLOOR AREA |     |

I am not in possession of an approval for the building located at the above listed address, and therefore I am requesting a Certificate of Occupancy, pursuant to the Residential Code of Ohio (RCO) Sections 111 and 115. I have been the owner / authorized agent of the above listed property since \_\_\_\_\_. I am requesting approval for the building to be utilized as, \_\_\_\_\_.

Attached to this letter is my request for approval from the local Zoning Department and other agencies (both local and state) as required. To the best of my knowledge the County of Summit, Department of Building Standards has no outstanding orders pending against this property.

For your reference, I have included a floor plan (evacuation plan), which indicates the use of each room or area of the building for which I am requesting approval.

I am enclosing payment (**\$257.55**) for a **Special Inspection**, and I understand that you will need to inspect the premises for serious hazards (life-safety). You may contact me to arrange a time for this inspection to be conducted.

\_\_\_\_\_  
SIGNED TITLE

Signed and subscribed in my presence this \_\_\_\_\_ day, of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
NOTARY