



# CITY OF FAIRVIEW PARK

20777 Lorain Road  
Fairview Park, Ohio 44126-2018

– Established in 1910 –

Patrick J. Cooney, Mayor

## Building Department

### CONTRACTOR REGISTRATION

The following items are necessary for Registrations to be issued for the City of Fairview Park,  
**BONDS ARE NOT REQUIRED:**

- Completed application form. (attached)
- A fee of \$110.00 for registration or renewal will be good for one year from the date of registration.
- Certificate of Insurance (\$300,000/\$500,000.00 for liability and in the amount of \$100,000.00 for property damage) naming the City as **ADDITIONALLY INSURED.**
- Completed R.I.T.A. form. (attached)
- A copy of your State license for Electrical, H.V.A.C., Plumbing, Hydronic and Refrigeration.

**Submittal by mail must include a Self-Addressed Stamped Envelope.** Return all the necessary documents to the Building Division prior to applying for any permits or doing any work in the City. If not included, registration will not be mailed. It will not be possible to issue a REGISTRATION if all of the above items have not been completed or enclosed.

“No person, corporation, partnership, firm or other business association acting in capacity of a contractor shall work at the trade or occupation of building, constructing, erecting, altering, repairing, painting, moving or demolishing any building or other structure, or do landscaping, tree surgery or tree forestry on the site thereof or any other site, or do plastic work, mason work, brick laying, roofing work, paving, fencing unless such person, corporation, partnership, firm or other business association has been duly registered as a contractor with the Division of Building **prior** to any work in Fairview Park.”

If you have any questions concerning the above, please do not hesitate to call the Building Division or visit our website at [www.fairviewpark.org](http://www.fairviewpark.org)

Walter V. Maynard, Building Commissioner  
Michael A. Greer, Asst. Building Commissioner  
Building Division  
City of Fairview Park  
(440) 356-4405  
Fax: (440) 356-4404

**CITY OF FAIRVIEW PARK**

**APPLICATION FOR CONTRACTOR'S REGISTRATION**

**EXPIRES ONE YEAR AFTER ISSUANCE**

Initial Application  
[\$110.00]

Renewal  
[\$110.00]

I/We \_\_\_\_\_

Business Name/DBA: \_\_\_\_\_

with principal offices located at: \_\_\_\_\_  
(number & street)

\_\_\_\_\_  
(city, state, zip code) (phone #: area code, number)

\_\_\_\_\_  
(signature of applicant) (date) (title)

Federal I.D. Number/S.S.N.: \_\_\_\_\_ FAX Number \_\_\_\_\_

do hereby make application for the following Registrations as checked below (check all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Building Contractor            | <input type="checkbox"/> Siding Contractor                         |
| <input type="checkbox"/> *Electrical Contractor         | <input type="checkbox"/> Sewer & Potable Water Installer           |
| <input type="checkbox"/> *Plumbing Contractor           | <input type="checkbox"/> Plastering/Drywall contractor             |
| <input type="checkbox"/> *Mechanical Contractor "HVAC"  | <input type="checkbox"/> Glazing Contractor                        |
| <input type="checkbox"/> Building Moving Contractor     | <input type="checkbox"/> Fire Equipment Installer (State # _____ ) |
| <input type="checkbox"/> Excavating & Paving Contractor | <input type="checkbox"/> Landscaping Contractor                    |
| <input type="checkbox"/> Roofing Contractor             | <input type="checkbox"/> Fencing Contractor                        |
| <input type="checkbox"/> Concrete & Masonry Contractor  | <input type="checkbox"/> Swimming Pool Contractor                  |
| <input type="checkbox"/> Sign Contractor                | <input type="checkbox"/> Waterproofing Contractor                  |
| <input type="checkbox"/> Home Improvement Contractor    | <input type="checkbox"/> Insulation Contractor                     |
| <input type="checkbox"/> Lawn Sprinkler Contractor      | <input type="checkbox"/> *Hydronic/Boiler                          |
| <input type="checkbox"/> Other _____                    | <input type="checkbox"/> *Refrigeration                            |

\* Must have license from State of Ohio

- A Corporation       Co-partnership       A Proprietorship       Other

President's name: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Vice president's name: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Have you ever pulled permits or been registered with the City of Fairview Park? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you be doing work that requires U.S. EPA Certification of Lead Safe Work Practices? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide evidence of U.S.EPA Certification of Lead Safe Work Practices.



# CITY OF FAIRVIEW PARK

20777 Lorain Road  
Fairview Park, Ohio 44126-2018

– Established in 1910 –

Patrick J. Cooney, Mayor

**This form is to be filled out only if the Principal is  
NOT the specialty trade license holder**

Dear Sir/Madam:

Please be advised that \_\_\_\_\_, holder of a current [Electrical, Plumbing, HVAC, Hydronic, and/or Refrigeration] License/Registration with the State of Ohio, is employed by my company, and thereby a (n) [Electrical, Plumbing, HVAC, Hydronic, and/or Refrigeration Registration] will be issued on my behalf. **Be further advised that if this License/Registration holder is terminated or resigns from employment with my company, The Fairview Park [Electrical, Plumbing, HVAC, Hydronic, and/or Refrigeration] Registration shall be NULL and VOID.** I will so notify the City of Fairview Park Building Department if any employee changes of this type occur.

Sincerely,

\_\_\_\_\_  
Principal Owner of the Company

\_\_\_\_\_  
Date

Please Print Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_  
\_\_\_\_\_

## FAIRVIEW PARK BUILDING REGULATIONS FOR RESIDENTIAL CONSTRUCTION

All individuals/companies working in the City of Fairview Park must be registered. (i.e.: general contractors, sub-contractors, painters, movers of buildings, landscapers, tree surgeons, tree forestry, plasterers, masons, brick layers, roofers, pavers, plumbers, electricians, heating/air conditioning contractors, etc.)

### INSPECTIONS - Prior day notice for all inspections

- Building Permit** - Requires ten (10) calendar day posting period for plan approval
- Plumbing Code** - Ohio Plumbing Code—Latest Edition
- Electric** - Electrical Code—NEC Latest Edition
- Residential Building** - Residential Code of Ohio (One, Two & Three Family Dwelling)—Latest Edition
- Energy Code** - Paths for Compliance, 2009 IECC, RCO or OHBA per chapter 11 of the  
2013 RCO

- Footer for detached garage** - 4" curb, 4" pad and minimum of 12" ratwall around entire perimeter including under overhead garage door for 600 sq. ft. or less.  
**Over 600 sq. ft. must have a footing below the frost line of 38".**

#### **Waterproof & Water Control**

- Footer Tile** -Clean outs to be installed on each side of basement, when building a new basement. On waterproofing, wall repair, footer tile replacement; a clean out shall be installed on each wall being worked on.
- Wall Backfill** -Washed- Limestone/river rock to within 18" of grade
- Filter Membrane** -Filter membrane shall be installed to separate stone fill & dirt covering excavation. Contractor shall call for inspection of membrane before dirt backfill.
- Water Control** - Inside drain tile shall be glued. End cap will be perforated. Minimum concrete covering stone & tile will match existing floor thickness.
- Wall Backfill** - Washed -Limestone/river rock to within 18" of grade

- Roofing** - Maximum two layers before complete tear off.
- Miscellaneous Permits** - Including **but not limited** to windows, siding/trim, roofing, decks, sheds, fences, water tanks, pools, remodeling, sprinkler system, paving, sidewalks, fireplaces, furnace, A/C, and recreational vehicle storage.

These items are a general reminder of some of the requirements for Contractors & Sub-contractors doing work in Fairview Park. **THE FOLLOWING INSPECTIONS ARE REQUIRED--CALL BEFORE COVERING.**

Lot line markers required  
Footing or Foundation Inspection  
Concrete slab or under floor inspection  
Frame inspection  
Lathe or Gypsum board if part of a fabricated or shear assembly  
Energy efficiency inspections  
Fire resistant penetrations  
Testing of residential building service equipment



# CITY OF FAIRVIEW PARK

20777 Lorain Road  
Fairview Park, Ohio 44126-2018

– Established in 1910 –

Patrick J. Cooney, Mayor

## Attention Contractors and Homeowners

Effective July 1, 2019

### Significant Changes to the Residential Code of Ohio

As of July 1<sup>st</sup> the 2109 Residential Code of Ohio will be replacing the current 2013 Residential Code of Ohio. Any plans submitted prior to July 1<sup>st</sup> 2019 will be reviewed based on the current code cycle. Below are a few examples of what some of the significant changes will be:

- RCO 4031.4.4 – ~~The exemption of freestanding accessory structures such as garage 600 sq. ft. or less with 8' walls or 400 sq. ft. or less with 10' walls built with light frame construction has been deleted. All accessory structures such as garages are required to have frost protected footings in accordance with sections of the RCO.~~ **UPDATE-** Upon review, the Ohio Board of Building Standards has decided to bring back the shallow foundation exception via (OAC 4101:8-4-01) petition #19-03. This is not an immediate process and will most likely be effective in 2020. Under (RCO 104.2.1) the Building Official shall render interpretations of this code and adopt policies and procedures to clarify the application of its provisions. For shallow foundations the Fairview Park Residential Building Official will reference (RCO 301.1.1) allowing engineered design (shallow foundations) enforceable by the exceptions in code section (OBC 1809.5) if the Ohio Building Code. Shallow foundations for accessory structures with light frame construction under 600 sq. ft. or masonry accessory structures under 400 sq. ft. will not be required to have full depth footings.
- RCO 405.1 – Footer tile or the washed gravel shall be surrounded by an approved filter membrane
- RCO 502 – Chapter 5 has been expanded to include deck framing with further illustrations, span tables, footing methods and post connections
- RCO 1105.1 – Is now requiring documentation (New Construction) on air sealing details, duct sealing, equipment, systems, insulation materials and R values, etc.
- RCO 1108 – Additions shall comply with the revisions of this code and comply to new construction standards
- RCO 1109 – Alterations need not apply to the revisions of this code if the energy consumption of the building has not increased, 1) storm windows installed over existing fenestration 2) existing ceiling, wall or floor cavities exposed during the course of construction are filled with insulation 3) construction where the existing roof, wall or floor cavity is not exposed 4) roof recover 5) roofs without insulation in the cavity where the sheathing or insulation is exposed during re-roofing shall be insulated above or below the sheathing

This list is an example of the changes we can expect. You can also find the entire RCO 2019 here [https://www.com.ohio.gov/documents/bbst\\_ResidentialCodeofOhioEffectiveJuly1,2019.pdf](https://www.com.ohio.gov/documents/bbst_ResidentialCodeofOhioEffectiveJuly1,2019.pdf)

If you have any questions please feel free to reach out to any one of us by phone at 440-356-4405.

Thank you.

Walter Maynard

Building Commissioner



FEDERAL IDENTIFICATION NUMBER \_\_\_\_\_

SOCIAL SECURITY NUMBER (COMPLETE ONLY IF A SOLE PROPRIETOR) \_\_\_\_\_

FILING STATUS:  CORPORATION  ESTATE/TRUST  LLC  NON-PROFIT  PARTNERSHIP  S-CORP.  SOLE PROPRIETOR

RITA LOCATION NAME AND ADDRESS AS USED FOR BUSINESS PURPOSES

BUSINESS NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

IF CORPORATE SUBSIDIARY, GIVE NAME AND ADDRESS OF PARENT COMPANY MAIN OFFICE

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

IF SOLE PROPRIETORSHIP, GIVE OWNER'S NAME AND HOME ADDRESS

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WHAT DATE DID YOU BEGIN OPERATIONS IN A RITA MUNICIPALITY? \_\_\_\_\_

PLEASE LIST THE COMPANY NAICS CODE OR CHECK THE BOX THAT BEST DESCRIBES THE COMPANY BUSINESS TYPE.

NAICS \_\_\_\_\_  TRANSPORTATION  NON MANUFACTURING  MANUFACTURING  WHOLESALE  
 RETAIL  FINANCE  SERVICES  PUBLIC ADMINISTRATION  NON CLASSIFICATION

EMPLOYEE INFORMATION

DO YOU HAVE ANY EMPLOYEES? (CHECK ONLY ONE)  YES  NO ARE CONTRACTORS UTILIZED? (CHECK ONLY ONE)  YES  NO  
\*IF YES COMPLETE REVERSE SIDE.

IF YOU HAVE EMPLOYEES PROCEED WITH EMPLOYEE INFORMATION. IF YOU DO NOT HAVE EMPLOYEES PROCEED TO THE PROFIT/LOSS SECTION.

NUMBER OF EMPLOYEES AT RITA LOCATION: \_\_\_\_\_ MONTHLY GROSS PAYROLL AT RITA LOCATION: \_\_\_\_\_

WILL YOU BE WITHHOLDING RESIDENCE TAX ONLY?  YES  NO

SEND WITHHOLDING TAX FORMS TO

BUSINESS NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_

CARE OF: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

IF YOU ARE A NON-PROFIT ORGANIZATION STOP HERE AND SIGN AT BOTTOM

PROFIT/LOSS INFORMATION

ENDING DAY OF FISCAL YEAR IF OTHER THAN CALENDAR YEAR \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR

SEND NET PROFIT TAX RETURN TO

BUSINESS NAME: \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_

CARE OF: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

THE INFORMATION HEREBY SUBMITTED IS TRUE AND CORRECT.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_ PHONE: \_\_\_\_\_