



City of Lorain

Foundation Repair/Replacement Waterproofing Permit Application

APPLICATION MUST BE FILLED OUT COMPLETELY & LEGIBLY

SECTION I – General Information

Date _____

Estimated Total Cost of Project \$ _____

Address of construction _____

Owner name _____ Phone _____ Email _____

Owner's full address _____

Contactor name _____ Phone _____ Email _____

Contractor's full address _____

Valuation \$ _____
Permit Fee _____
1% State Fee _____
3% State Fee _____
Technology Fee \$7.00
Review Fee _____
Other Fee _____
Total Fees \$ _____
<input type="checkbox"/> Card <input type="checkbox"/> Cash <input type="checkbox"/> Chk# _____
Permit # _____
Date issued _____

REQUIREMENTS:

- All questions on applications must be answered
- Provide all required drawings (residential-2 copies) (commercial- 5 copies)
- Detailed description of work
- Areas below grade must be ventilated
- Dimensions
- Material lists

- A sump pump discharge must be connected to the City storm sewer if available, unless otherwise approved by the City of Lorain
- All foundation drainage within the City of Lorain shall be installed according to the Building and Zoning Codes and State Codes
- If during the course of construction, a connection pipe to the sanitary sewer is exposed, the cross connection must be removed and the water from footing drains shall be mechanically removed by pumping it to an approved outlet.
- For foundation REPAIRS and WATERPROOFING complete A and B
- For REPLACEMENT WALLS complete the entire application

SECTION II – Description of Property and Project

Type of structure: Residential Commercial Owner Occupied Number of Dwelling Units _____

A. Areas involved in repair/replacement - describe work to be completed: _____

B. Size and type of footer tile _____ Type and depth of stone-fill _____
Will footer water discharge be by gravity by sump pump Will the existing path of discharge be altered Yes No

If yes, explain _____

C. Submit a detailed cross-sectional drawing of the footer, wall, sill plate, anchor bolts, drain tile, stone fill, method of sealing the wall, and identify all materials and dimensions and complete the following:

Footer thickness _____ Footer width _____ Footer depth below grade _____ Size of sill plate _____

Type of anchorage _____ Column pad thickness & width _____

Size & number of windows to be replaced _____

In signing this application, the applicant furthermore consents to be bound by this application, by an agreement made by the applicant or its agent, and by all decisions made by the City of Lorain relating to and in connection with this application.

Owner: I certify that I am the owner of the above property, that all information supplied are true and that the work will be performed only by myself, per Ordinance 118.96. sec III-1.

Contractor: I certify that I am authorized by the owner of the above property to obtain the described permit; that all information supplied are true and that the work will be performed by the contractor(s) who is/are registered with the City of Lorain Building Dept.

Owner's Agent: I certify that I am authorized by the owner of the above property to obtain the described permit; that all information supplied are true and that the work will be performed by the contractor(s) who is/are registered with the City of Lorain Building Dept.

Applicant signature _____ Date _____

Building Official _____ Date _____