CITY OF ROCKY RIVER 21012 HILLIARD BOULEVARD ROCKY RIVER, OH 44116

PHONE: (440) 331-0600 FAX: (440) 895-2628

	Permit Fee:	\$
Accessory Structure Permit	Plan Review:	<u></u>
Application	Total:	\$
FF	DATE:	
Address of Structure:		
OWNERSHIP:		
Name	Address	Phone
CONTRACTOR:		
Name	Address	Phone
TYPE OF STRUCTURE: □ SHED □ DECK □ PI SIZE Of STRUCTURE:	LAY STRUCTURE POOL CORNER	□ OTHER R LOT?: Yes □ No □
Dumpster POD Start Date:	End Date:	
Dumpsters & Pods - \$45.00 Flat Rate and shall be a	llowed on-site for a max	imum of 15
days unless associated with a building permit.		
VARIANCE NEEDED: Yes □ No □	ESTIMATED C	OST: \$.
BOARD OF APPEALS MEETING DATE:		
Type of Variance:		
OWNER/APPLICANT SIGNATURE:		
 Attach site drawing showing location of propogarage and/or other existing structures and Submit application and drawings to the Buildi to display an "Intent to Build" sign for 10 It is the responsibility of the property owner/collocation structure. 	I property lines. Provide ng Department. The ap days. After 10 days a p ontractor who is issued	e dimensions of structure plicant will be required ermit can be obtained. the permit to verify the
For office use only:		
NOTICES SENT TO ABUTTING NEIGHBORS	Permanent Parcel	
	10 Day Posting C	ard Issued:
	Permit Issued:	
	Ego Doid Dotor	
DATE NOTICES SENT:		