

**City Of Rocky River**  
 21012 Hilliard Boulevard Rocky River, Ohio 44116  
**APPLICATION FOR RESIDENTIAL PLAN APPROVAL**

Submit one application per building or structure. **ALL** sections must be completed.

**APPROVALS DATES:**

Planning Comm: \_\_\_\_\_  
 Board of Appeals: \_\_\_\_\_  
 Design & Review: 2-20-24



Application Date: 2-06-24

Intent Sign Date: \_\_\_\_\_

<p><b>1 PLAN SUBMISSION</b></p> <p>Plan review will commence once all below plan copies are submitted.</p> <p>Have 2 paper and 1 digital plan been submitted for plan review? Yes ___ No <input checked="" type="checkbox"/></p> <p>If No, date to be submitted by: <u>2-07-24</u></p>	<p><b>2 TYPE OF PROJECT:</b></p> <p>___ New Building Construction</p> <p><input checked="" type="checkbox"/> Building Addition</p> <p>___ Alteration (no additional sq. ft.)</p> <p>___ Repair/Maintain/</p> <p>___ Accessory Building( &gt; 200 sqft )</p> <p>___ Other (driveway, retaining wall )</p>	<p><b>3 PHASED PLAN REVIEW:</b></p> <p>___ Foundation</p> <p>___ Framing</p> <p>___ Other</p> <p>___ Other</p> <p>___ Other</p> <p>___ Other</p>
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**4a. DESCRIPTION OF THE EXTENT OF WORK INCLUDED FOR APPROVAL: (RCO 107.2.1)**  
CONSTRUCTION OF A NEW OWNER'S SUITE AND PEN ON THE FIRST FLOOR

**4b. Total Estimated Cost :** \$ T.B.D.

**4c. List total square footage of All levels of construction.** (Foundation = 839 sf.) (Main Floor = 839 sf.)  
 (Second Floor = NA sf.) (Attic/Roof = 839 sf.) (Other = \_\_\_\_\_ sf.)

**5 PROJECT LOCATION: (RCO 107.2.2)**

Legal description \_\_\_\_\_  
 Street Address 2461 KENWOOD  
 City/Township ROCKY RIVER, OHIO Zip Code 44116 County CUYAHOGA  
 Directions \_\_\_\_\_

Is this project/building located in a flood plain? Yes \_\_\_ No   
 Has flood plain administrator been contacted for requirements? Yes \_\_\_ No

**6 Method Of Demonstrating Energy Code Compliance**

Demonstrating Compliance to the 2019 RCO Section 1101.14-1104 \_\_\_\_\_ or  
 Demonstrating Compliance to the 2019 RCO Section 1105 (Simulated Performance) \_\_\_\_\_ or  
 Demonstrating Compliance to the 2019 RCO Section 1106 (ERI) \_\_\_\_\_ or  
 Demonstrating Compliance to the 2019 RCO Section 1112 (OHBA option) \_\_\_\_\_ or  
 Demonstrating Compliance to the 2018 IECC

**7 BUILDING OWNER INFORMATION: (RCO 107.2.4)**

Name of owner MR. & MRS THOMAS DRESCHER Attention THOMAS  
 Street Address 2461 KENWOOD AVE City ROCKY RIVER State OH Zip 44116  
 Phone No. \_\_\_\_\_ Fax \_\_\_\_\_ E-mail TLW DRESCHER @ GMAIL.COM

**8 APPLICANT INFORMATION: (Owner or Owner's authorized agent) (RCO 107.2.4)**

Applicant ARCHITECTS, C.A. McGETTRICK LLC Attention CHUCK McGETTRICK  
 Street Address 19551 MADISON AVE. City LKWID. State OH Zip 44107  
 Phone No. 216 227-0700 Fax 216 227-0712 E-mail ARCHICAM@AMERITECH.NET

9 REGISTERED DESIGN PROFESSIONAL -IF APPLICABLE: (RCO 106.1.1-3, 106.2)

Architect       Engineer       Certified Fire protection system installer  
 Designer CHARLES A. MCGETRICK, JR. PRES. Registration /Certificate No. 7705914  
 Street Address 14551 MADISON AVE. City LKW'D. State OH Zip 44107  
 Phone No. 216 227-0700 Fax \_\_\_\_\_ E-mail ARCHICAM@AMERITECH.NET

10 EVIDENCE OF RESPONSIBILITY: (RCO 106.2)

(Required residential construction documents, when submitted for review as required under RCO section 107, shall bear the identification of the person primarily responsible for their preparation. Ohio Revised Code Section 3791.04 (A)(2)(b) permits construction documents for any residential building to be prepared by persons other than a registered architect or engineer, unless per Ohio Revised Code Section 3791.04 (A)(2)(c), the proposed work involves technical design analysis. The building official may rely on the placement of a 'seal' on the documents as evidence that the registered architect or engineer performed the technical analysis.

Document Preparer Name CHARLES A. MCGETRICK, JR. Title/Company PRES., ARCHITECTS G.A. MCGETRICK LLC  
 Address 14551 MADISON AVE. City LKW'D. State OH Zip 44107

11 INDUSTRIALIZED UNITS INFORMATION: (The following information applies to the INDUSTRIALIZED UNITS and alternative materials, designs, methods of construction or equipment approved by the State of Ohio, Board of Building Standards Industrialized units (IU) program.) (RCO 106.1.4, Section 114)

- Authorized Manufacturer and project Information:
  - Approval number \_\_\_\_\_ Approval Date \_\_\_\_\_
  - Board approved documents submitted to local Building Official?  YES  NO
  - Details of on-site interconnection of modules or assemblies submitted to BO?  YES  NO

12a CONSTRUCTION DOCUMENTS REQUIREMENTS: (Refer to RCO 106.1-3 (1-9) for specific construction document requirements)

12b LOT LINE MARKERS REQUIRED: Before any work is started in the construction of a residential building or addition all boundary lines shall be marked at their intersections with permanent markers. (Refer to RCO 108.2 & 108.2.1)

**Time limitation of Application: (RCO 107.2.1)** The approval of construction documents under this section is a "license" and the failure to approve such construction documents as submitted within thirty days after filing or the disapproval of such construction documents is an "adjudication order denying the issuance of a license" requiring the opportunity for an "adjudication hearing" as provided by sections 119.07 to 119.13 of the Revised Code and as modified by sections 3781.031 and 3781.19 of the Revised Code. In accordance with section 109, an adjudication order denying the issuance of a license shall specify the reasons for such denial.

13 CERTIFICATION: (RCO 107.2.5)

I certify that I am the  Owner  Owner Authorized Agent. All information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above and copied to the Owner.

Signature C.A. McGettrick, Jr. PRES.  
 Print Name C.A. MCGETRICK, JR. Date 2/06/2A

14 THE AREA BELOW IS FOR OFFICIAL USE ONLY:

Fee Description	Amount	Deposits
PLAN REVIEW		
Permit Fee		
Other Fees		
Sub-Total	\$	\$
B.B.S. +1%		
Curb Crossing		
Street Cleaning		
Curb Cut		
Sewer Tie In Fee		
Total Fees	\$	
Date Received _____	Estimated Cost _____	
Check Number _____	Permit Number _____	
Processed By _____		

Notes: