



ENGINEERING DIVISION

Geothermal System Permit

⌘ THE CITY OF URBANA ⌘
 ENGINEERING, PLANNING & ZONING
 ♦ 205 S. Main St. ♦ Urbana, OH 43078 ♦
 ♦ Ph: 937.652.4324 ♦ www.urbanaohio.com ♦

Office Use Only

Date Filed: _____
Permit No. _____
Fee: \$25.00
Approved By: _____

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Submittal of an application does not constitute acceptance for processing until the Engineering Division reviews the application for accuracy and completeness.

Property Address:	
Owner of Property: _____	
Telephone: _____	Fax: _____ Email: _____
Zoning: _____ Current Use: <input type="checkbox"/> Residential <input type="checkbox"/> Business <input type="checkbox"/> Industrial	
Project Contact (Architect, Engineer, Planner, Contractor, etc.)	
Name of Contractor: _____	
Address: _____	
Telephone: _____	Fax: _____ Email: _____
Applicant(s) (if different than owner)	
Name: _____	
Address: _____	
Telephone: _____	Fax: _____ Email: _____
Proposed Work	Checklist for Geothermal: <input type="checkbox"/> Closed-loop Only <input type="checkbox"/> IGSHPA Certified <input type="checkbox"/> Heat Fused PE Pipe <input type="checkbox"/> Grouted Boreholes <input type="checkbox"/> Only "Food-grade" Antifreeze Components <input type="checkbox"/> Behind Front of Primary Structure <input type="checkbox"/> 5' Rear and Side Yard Setback <input type="checkbox"/> Two Inspections by City <input type="checkbox"/> Provide Loop Layout to Engineering
	Description of proposed work (vertical or horizontal system, number of loops, placement, etc.): _____ _____

The undersigned hereby applies for a permit to construct a geothermal system herein located and described. The undersigned states that he/she is well informed on the Planning and Zoning Code of the City of Urbana Chapter 1167 Construction Standards and Drawings and guarantees that all work and material will meet or exceed the minimum requirements of that Code. He/she certifies that the information contained herein including attachments is correct to the best of his/her knowledge. The undersigned understands that knowingly falsifying this information may be grounds for the denial or revoking of this application and subsequent approval thereof. He/she also understands that if a permit is issued, it shall remain in force for six calendar months.

Applicant's Signature/Date