

**PAYMENT NOT REQUIRED FOR 1,2, OR 3 FAMILY DWELLING HOUSES**

**CITY OF CINCINNATI**  
Department of Buildings and Inspections  
3300 Central Parkway  
Cincinnati, Ohio 45225

**ENGINEERING CHANGE**  
DATE: \_\_\_\_\_

**COMPLETE IN INK - PLEASE PRINT**

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Street & Number Location \_\_\_\_\_ Zip Code \_\_\_\_\_

Submitted to: \_\_\_\_\_  
(Plans Examiner)

**NOTE:** Section 1101-28.2 of the COBBC limits the use of this form only to minor changes in the work. Submit four completed forms with four sets of plans or specifications.

**PLAN NO.:** \_\_\_\_\_

**DESCRIPTION OF CHANGE(S):**

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**APPLICANT:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**MAIL TO:**

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**RECEIPT #:** \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**APPROVED BY:**

**PLAN:** \_\_\_\_\_

**ZONING:** \_\_\_\_\_

**M.S.D.:** \_\_\_\_\_

**STORMWATER:** \_\_\_\_\_

**OTHER:** \_\_\_\_\_

Route to:  Housing

GBI

HVAC