



Board of Building Standards

CERTIFICATION COMMITTEE MEETING AGENDA (AMENDED 11/16/2022)

DATE: NOVEMBER 17, 2022
TIME: 10:00 AM
LOCATION: BBS LIBRARY, 6606 TUSSING ROAD,
REYNOLDSBURG, OHIO

[Click here to join the meeting](#)

Call to Order

Consent Agenda

Personnel Certification Applications

[P-1](#) Mullins, Christopher - BI
Cert ID: 8949
Current Certifications: None
Staff Notes: Additional information submitted. Applicant may come to speak to committee.
Committee Recommendation:

[P-2](#) Aigner, Kristopher - ESI, BI
Cert ID:
Current Certifications: none
Staff Notes: Recommend approval for ESI. Application does not include information on structural experience, recommend request for additional information on BI.
Committee Recommendation:

[P-3](#) Cunningham, Robert - ESI
Cert ID:
Current Certifications: None
Staff Notes: Received after ESIAC submission, recommend approval.
Committee Recommendation:

[P-4](#) Julian, John - RBI
Cert ID: 8710
Current Certifications: None
Staff Notes: Additional information submitted. Recommend approval.
Committee Recommendation:

[P-5](#) Langdon, Raymond - BO
Cert ID: 4800
Current Certifications: BI, RBO, RBI
Staff notes: Review experience.
Committee Recommendation:

- P-6 Monaco, Michael - BI Trainee, RBI Trainee
 Cert ID: 2073
 Current Certifications: None, has held RBI Interim several times over last 10 years without completing requirements.
 Staff Notes: No sponsor/supervisor signed paperwork submitted, recommend review of certification history.
 Committee Recommendation:
- P-7 Mowry, Michael - ESI, PI
 Cert ID: 8793
 Current Certifications: MPE, BI, RPE, RBI
 Staff Notes: PE. Extensive history designing plumbing and electrical systems: recommend approval.
 Committee Recommendation:
- P-8 Sholtis, Scott - ESI, BI
 Cert ID: 8976
 Current Certifications: None
 Staff Notes: Received after ESIAC opinions. Appears to meet qualifications for ESI. Recommend request for additional information on BI.
 Committee Recommendation:
- P-9 Oliver, Christopher - ESI
 Cert ID:
 Current Certifications: None
 Staff Notes: Received after ESIAC submission, journeyman certificate included: recommend approval.
 Committee Recommendation:
- P-10 Taylor, Ted - PI
 Cert ID: 8974
 Current Certifications: None
 Staff Notes: Employer is OCILB plumbing contractor, research indicates high volume permits for multifamily new builds in Franklin county. Recommend approval.
 Committee Recommendation:

Building Department Certification Applications

Old Business

- OB-1 BBS 2022-002 Investigation Summary Report (Arocho)

New Business

- NB-1 Building Department Award Discussion
 Committee will discuss board and staff recommendations.
- NB-2

Adjourn

**CERTIFICATION COMMITTEE MEETING
CONSENT AGENDA**

Certification Applications

- C-1 Farley, Shawn - ESI
Cert ID:
Current Certifications: None

- C-2 Haines, Jeffrey - BI
Cert ID: 8970
Current Certifications: None

- C-3 Jacobs, Larry - BO
Cert ID: 702
Current Certifications: MPE, Registered Architect since 1996

- C-4 LeMaster, Matthew - BI, ESI
Cert ID: 8965
Current Certifications: None, has passed ESI exams

- C-5 Lynch, Benjamin - PI
Cert ID: 8969
Current Certifications: None

- C-6 McGowan, Thomas - FPPE Trainee
Cert ID: 8455
Current Certifications: FPI

- C-7 Spruill Jr, James C - FPPE
Cert ID: 2227
Current Certifications: BO, BI, BPE, RBO

- C-8 Thompson, Arlington - MechPE
Cert ID: 6251
Current Certifications: MI, RMI

- C-9 Woidke, John - FPPE Trainee
Cert ID: 6041
Current Certification: FPI

- C-10 Brigner, Randy - RBI
Cert ID: 8971
Current Certifications: None

- C-11 Flynn, Scott - BI
Cert ID: 8895
Current Certifications: RBI

C-12

Thomas, William - RBO
Cert ID: 8972
Current Certifications: None

Consent-Certificates Issued Administratively

A-1 Young, Patrick - RBO
Caldwell, James - RBI
Hare, Bruce - RBO, RBI

File Attachments for Item:

P-1 Mullins, Christopher - BI

Cert ID: 8949

Current Certifications: None

Staff Notes: Additional information submitted. Applicant may come to speak to committee.

Committee Recommendation:

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Building Inspector Certification | T |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| TC: ~ 5 years | 1-12-2022 |
| Related Vocational or Technical Training | Years' Experience |
| Welding 3G Stick 1" 2F | 6 Years |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |
| Quality masonry CO. | 6 1/2 Years |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|---|
| <i>Example: Children's Hospital, Toledo Structural steel work on addition</i> | <i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i> | <i>July 2013-May 2014 (10 months)</i> |
| Total Experience on This Page (In Months): | | |

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From To (MM/YY) |
|--|--|-----------------------------------|
| St. Joseph Catholic Church Crestline, Ohio repaired wood and stone on Bell tower | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | March - Sept. 2016 (6 months) |
| Marion Palace Theatre Marion, Ohio repaired Brick on parapet walls removed old Terracotta and installed new | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | Sept. - Feb 2016-2017 (5 months) |
| Arcadia High School Arcadia, Ohio Pressure washed entire building removed broken brick and repaired with new brick cut out bad mortar and repointed | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | Feb. - Oct. 2017 (8 months) |
| Saint Mary's school Marion, Ohio completely removed old roof and put down new sheeting and installed new valley metal and reshingled roof | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | NOV. - March 2017-2018 (4 months) |
| Orient prison Orient, OH removed/installed new sheeting and shingles on roof | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | April - July 2018 (4 months) |
| Stengel True Museum Marion, OH Repaired/removed old wood on cupola removed and reinstalled new shingles relined gutters with new EPDM and scraped & painted entire building | QMC 1001 S. Prospect St. Marion, OH 43302 740 3876720 | Aug - Dec 2018 (4 months) |
| Total Experience on This Page (In Months): | | |

| | | |
|---|---|---|
| <p>The Columbus Columbus, OH replaced old/broken brick cut out/reinstalled motor formed and poured new concrete sidewalk</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>2019 (3 mo)</p> |
| | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>April - May 2019 (2 m)</p> |
| <p>Kenia Elementary School Gym Formed/poured all new sidewalks completely around school fabricated all new handrails on site and installed</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>May - July 2019 (3 m)</p> |
| <p>Westerville City Hall removed/reinstalled clock tower to repair deteriorating base reinstalled new EPDM Rubber footing/reshingled rest of roof</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>July - Jan 2019 - 2020 (6)</p> |
| <p>Westerville City Hall removed/reinstalled clock tower to repair deteriorating base reinstalled new EPDM Rubber footing/reshingled rest of roof</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>Jan - June 2020 (5 m)</p> |
| <p>Westerville City Hall removed/reinstalled clock tower to repair deteriorating base reinstalled new EPDM Rubber footing/reshingled rest of roof</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>July - Dec 2020 (5 m)</p> |
| <p>Linn School marion, OH Repaired exterior wall and foundation after semi ran into it reinstalled new floor joists and Hardwood floors</p> | <p>QMC 1001 S. Prospect St. marion, OH 43302 7403876720</p> | <p>Jan - May 2020 2021 (1 year)</p> |
| <p>Columbus State House Columbus, OH repaired concrete in parking garage on columns and walls</p> | | |
| <p>Marion City Fire Department marion, OH welded in new I Beams for floor in Garage and welded in additional steel column supports</p> | | |
| <p>Columbus Post Office Columbus, OH cut out old concrete on loading dock installed new rebar, formed/poured new concrete removed and repaired/fabricated new handrails and reinstalled</p> | | |

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

No

If you answered "No" please explain below:

| |
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| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: *Christopher Mullins*

Subscribed and duly sworn before me according to law, by the above named applicant this day 4th of October in the year 2022 at MARION, County of MARION and State of OHIO.

Notary Public: *Beverly S. Sigrst*, Notary

Beverly S. Sigrst
Notary Public in and for the State of Ohio
My Commission Expires January 28, 2024





Department of Commerce

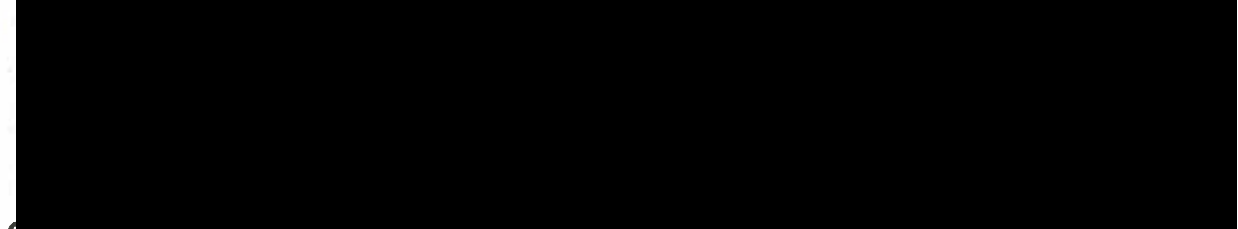
BOARD OF BUILDING STANDARDS

APPLICATION FOR INTERIM CERTIFICATION
NON-RESIDENTIAL BUILDING DEPARTMENT PERSONNEL

This application is submitted to the Board of Building Standards as specified in the provisions of Section 3781.10 of the Ohio Revised Code and 4101:7-3-01 of the Ohio Administrative Code.

Applicant Information

| | |
|----------------------------|----------------------------------|
| Name: <u>Chris Mullins</u> | BBS Certification ID: <u>N/A</u> |
|----------------------------|----------------------------------|



Ohio Building Department Personnel applicants must possess the required experience as specified in rule 4101:7-3-01 of the Ohio Administrative Code.

To apply for interim certification:

- Complete this application and sign in front of a notary
- Include non-refundable application fee of **\$50.00 per certification** payable to **Treasurer, State of Ohio/BBS (Check or Money Order ONLY)**
- Include examination results, if taken (optional for initial application)
- Submit this complete application with fee at least 10 days before next Board meeting

Approval process:

- Certification Committee considers each individual application and make recommendations to the Board of Building Standards
- You will receive notice of the Board's action within 7-10 business days of the meeting by US mail

If interim certification is granted:

You are qualified and allowed to perform the duties of the certification while employed or under contract with a certified building department.* The interim period is two years.

*ESI applicants will not receive their interim certification until they have passed the required examinations.

You must complete your exams within two years.

See attached Matrix of Experience and Examinations

You must complete the Ohio Building Code Academy (OBCA) within two years.

If you fail to complete the OBCA and/or required examinations by the expiration of the interim certification, you will not be able to work as a certified code enforcement professional under this interim certification. No extensions of interim certifications will be granted.

The Ohio Board of Building Standards is a public entity and any information provided to BBS may constitute a public record, available to anyone who requests it. Please do not include any personally identifiable information beyond this page

Ohio Board of Building Standards
6606 Tussing Road
Reynoldsburg, OH 43068-9009

Timothy Galvin, Chairman

An Equal Opportunity Employer and Service Provider

Chris Mullins

RECEIVED
614-644-2613
Fax 614-644-3147
TTY/TDD 800-750-1750
sep 30 2022
www.ohio.gov/dico/bbs/

BOARD OF BUILDING STANDARDS

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Mullins
Last Name

Christopher
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Sworn And Signed In my Presence
This 27th Day of September, 2022

Beverly S. Signst, Notary

Beverly S. Signst
Notary Public in and for the State of Ohio
My Commission Expires January 28, 2024

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Mullins
Last Name

Christopher
First Name

N/A
BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|--|--------------------------|
| Formal Education | Date Graduated |
| Tri-Rivers | 1-12-2022 |
| Related Vocational or Technical Training | Years' Experience |
| Welding 3G Stick 1" | 1-12-2022 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| | |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Mullias
Last Name

Christopher
First Name

N/A
BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

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2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|---|--|-----------------------------------|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Intern Certificate, Building Department (Residential)

City Name

Firm Name

City Code (Please fill)

| List Each Construction Project and Specify Type of Work Performed | Name of Employer, Company, Address, Telephone Number | Project Time: From, To (MM/YY) |
|---|--|--------------------------------|
| Westerville Court House Structural Roof work | QMC 1001 S. Prospect St. Marion, OH 740 387 6720 | Aug - Sep 2020 |
| Marion City fire Station structural welding for floor | QMC 1001 S. Prospect St. Marion, OH 43302 740 387 6720 | Nov. - Dec 2021 |
| Harding High School ticket Booth EXCavating and foundation work | QMC 1001 S. Prospect St. Marion, OH 43302 740 387 6720 | 2019 |
| Columbus State House Patching and repaint masonry | QMC 1001 S. Prospect St. Marion, OH 43302 740 387 6720 | 2018 |
| Columbus State House Structural repair in parking garage | QMC 1001 S. Prospect St. Marion, OH 43302 740 387 6720 | 2020 |
| Immaculate Conception Church Columbus Stone work | QMC 1001 S. Prospect St. Marion, OH 43302 740 387 6720 | 2019 |
| Loads more too much | | |
| Total Experience on This Page on Working | | |

To list.

From: [Hanshaw, Regina](#)
To: [Foley, Megan](#)
Cc: [Jones, Amy](#)
Subject: FW: Christopher Mullins building inspector application
Date: Thursday, November 10, 2022 11:09:35 AM
Attachments: [image001.png](#)

Please include with Chris' application on the agenda.

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Tuesday, November 8, 2022 10:04 AM
To: Hanshaw, Regina <Regina.Hanshaw@com.ohio.gov>
Subject: Re: Christopher Mullins building inspector application

This year I have done a few jobs to add that I didn't list
todco Marion Ohio

removed block wall and installed new steel stud wall framed and sheeted in metal repainted existing metal walls. August 10th 2022
to present for qmc Marion Ohio 43302 7403876720

3920 County hwy 217 Marengo ohio

Jacked up houes removed old foundation and laid in a new block foundation. June 7th 2022 to August 8th 2022 for qmc Marion
Ohio 43302 7403876720

1001 south prospect street Marion Ohio

Excavated a trench and installed conduit and Electrical for remotely controlled gate opener and key pad. May 2022 3 weeks

[Sent from Yahoo Mail on Android](#)

On Fri, Nov 4, 2022 at 12:31 PM, Regina.Hanshaw@com.ohio.gov
<Regina.Hanshaw@com.ohio.gov> wrote:

Chris,

I have reviewed your application and additional information and also asked our Board Chair to do so as well. Unfortunately, its does not appear that you have documented sufficient qualifying experience to meet the 5 years requirement. Based on the information you have provided so far, we can approve your application for residential building inspector or building inspector trainee if you have a building department sponsor. To pursue the trainee route, the building department would need to provide completed sponsorship forms. However, the Committee meets again on November 17th @ 10 am. You are welcome to attend virtually or in-person to discuss your experience and/or submit additional information demonstrating 5 years qualifying structural work regulated by the code for the building inspector certification. Meg Foley who I have copied can get you information on how to attend in-person or virtually once the meeting is set up.

Thanks,

Regina Hanshaw

OBBS

From: Jones, Amy <Amy.Jones@com.ohio.gov>
Sent: Friday, November 4, 2022 9:54 AM
To: Hanshaw, Regina <Regina.Hanshaw@com.ohio.gov>
Subject: FW: Christopher Mullins building inspector application

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Friday, November 04, 2022 8:36 AM
To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: RE: Christopher Mullins building inspector application

Hi Amy was wondering if u have heard anything yet regarding my application and if u could let me know when the next meeting is

[Sent from Yahoo Mail on Android](#)

On Tue, Nov 1, 2022 at 1:45 PM, Amy.Jones@com.ohio.gov

<Amy.Jones@com.ohio.gov> wrote:

I asked if it can be reviewed sooner, I will let you know tomorrow when I am in the office.

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Tuesday, November 01, 2022 1:27 PM
To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: RE: Christopher Mullins building inspector application

When exactly is that gonna be as I said I have already had an interview for the job 2 months ago waiting on this application

[Sent from Yahoo Mail on Android](#)

On Tue, Nov 1, 2022 at 1:08 PM, Amy.Jones@com.ohio.gov

<Amy.Jones@com.ohio.gov> wrote:

After looking into it, it was received. I was not in the office for 2 weeks due to covid. My supervisor missed putting it on the agenda and it will be reviewed at the next meeting.

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Tuesday, November 01, 2022 12:00 PM
To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: RE: Christopher Mullins building inspector application

It should have been received the beginning of October I know the meeting wasn't until the 21st and it was well within the time frame and needed to be turned in I believe I called you and asked you if you received it on the 11th because that would have been 10 days before the meeting and you told me that you did have it

[Sent from Yahoo Mail on Android](#)

On Tue, Nov 1, 2022 at 11:57 AM, Amy.Jones@com.ohio.gov

<Amy.Jones@com.ohio.gov> wrote:

I return to the office tomorrow and I will check the mail.

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Tuesday, November 01, 2022 11:42 AM
To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: RE: Christopher Mullins building inspector application

You should have received it in October approximately a week and a to 2 weeks before the board meeting

[Sent from Yahoo Mail on Android](#)

On Tue, Nov 1, 2022 at 11:15 AM, Amy.Jones@com.ohio.gov

<Amy.Jones@com.ohio.gov> wrote:

Hello,

Per our phone conversation, I stated that your format was correct. When I received the application, you created your own space at the bottom, signed and notarized the second page. I told you that you can not list just he months that you need to list your jobs as; Jan-May 2020= 5 months, totaling 5 years. You didn't include that last page where you state if you have had a felony and sign & notarize. I stated you need to be very detailed in the work you have performed. I have attached your application that was submitted. You may add additional pages in needed.

Thanks,



Amy Jones

Certification Specialist

Department of Commerce

Ohio Board of Building Standards

6606 Tussing Road

Reynoldsburg, Ohio 43068-9009

Direct **614-644-3777** fax 614-222-2184

 Please consider the environment before printing this e-mail

From: Chris Mullins <chrismullins59@yahoo.com>

Sent: Monday, October 31, 2022 5:38 PM

To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: RE: Christopher Mullins building inspector application

Im not sure what you mean I listed the jobs I have done since 2016 to present I don't know when I add it up it was over 5 years experience and when I call and spoke to you on the phone you told me that everything was perfect and that's exactly what they wanted to see im just really confused could u please send me a copy of the paperwork you have I now I ran out of room and had to finish on a blank sheet of paper

[Sent from Yahoo Mail on Android](#)

On Mon, Oct 31, 2022 at 2:26 PM, Amy.Jones@com.ohio.gov

<Amy.Jones@com.ohio.gov> wrote:

Hello,

The board has requested additional information. Your application stated 3 years' experience and you need 5. I have attached an application and you may add pages if needed. I sent you a new application last week. You do not need to have another one notarized or pay another fee.

From: Chris Mullins <chrismullins59@yahoo.com>
Sent: Monday, October 31, 2022 11:58 AM
To: Jones, Amy <Amy.Jones@com.ohio.gov>
Subject: Christopher Mullins building inspector application

Hi my name is Chris Mullins I was wondering if u could tell me whether or not my application was approved or denied

[Sent from Yahoo Mail on Android](#)

CAUTION: This is an external email and may not be safe. If the email looks suspicious, please do not click links or open attachments and forward the email to csc@ohio.gov or click the Phish Alert Button if available.

The information transmitted is intended solely for the individual or entity to which it is addressed and may contain confidential and/or privileged material. Any review, retransmission, dissemination or other use of or taking action in reliance upon this information by persons or entities other than the intended recipient is prohibited. If you have received this email in error please contact the sender and delete the material from any computer.

File Attachments for Item:

P-2 Aigner, Kristopher - ESI, BI

Cert ID:

Current Certifications: none

Staff Notes: Recommend approval for ESI. Application does not include information on structural experience, recommend request for additional information on BI.

Committee Recommendation:

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Aigner
Last Name

Kristopher
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD
(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Aigner
Last Name

Kristopher
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| Electronic Technical Institute | 1987 |
| Westside Technical Institute | 2000 |
| Related Vocational or Technical Training | Years' Experience |
| Generac Generator Technical Level 1 | 5 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |
| Charter Steel | 4 |
| Aigner Electric | 20 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Aigner
Last Name

Kristopher
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|-----------------------------------|
| Example: Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| City of Parma Load Calc. Generators, Distribution Panels, Ground Grids & Lighting For all Festival NEEDS | Parma Chamber of Commerce | 2006-2019 |
| US Cotton / 85. ppg NEW Set transformer, switch gear, Distribution Equipment Total lighting install Buss plugs | Aigner Electric 6159 W130 Parma Ohio 44130 216-244-1828 | May 2010 - Dec. 2011 |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Aigner

Last Name

Kristopher

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From To (MM/YY) |
|--|---|-------------------------------|
| US Cotton Expansion project for Cotton Coil Power disconnects-control Concrete conduit. | Aigner Electric 216-244-1828 6159 W. 130 Parma, Ohio 44130 | April 2007- Nov 2007 |
| ADALET Admin. + Foundry Panel upgrades. Factory Lighting upgrades, Foundry Equipment Install | Aigner Electric | FEB. 2010- Dec. 2012. |
| Echo Health Inc. Install new 60kw + Gear | Aigner Electric | March 2014 1 month |
| Dove Die Stamping Install transformer vault Gear + machine Feet | Aigner Electric | April 2013- May 2013 |
| Hooley House New restaurant install Equipment, Lighting interior controls, exterior patio Lighting | Aigner Electric | Sept. 2013 |
| South Shore Cable 22 Service masts Meter Bases + Grounding | Aigner Electric | March 2012- Aug 2012 |
| Hooley House New Restaurant Install West lake. Kitchen equipment, Lighting and Rebuild entrance | Aigner Electric | April 2015- MAY 2015 |
| Total Experience on This Page (In Months): | | |

Aigner

Last Name

Kristopher

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, - Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|---|-----------------------------------|
| Hoolen House Montrose New Equipment New Kitchen Pass outdoor patio Electric | Aigner Electric 6159 W. 130 PARMA, OHIO 44130 216-244-1828 | May 2015 - June 2015 |
| PSC Scrap YARD Demo Car Crusher YARD Lighting Project Burial Feeder. Repair Fuel Pump Project | Aigner Electric | Aug 2016 - Dec 2016 |
| Auto Tech 800amp service feeders, Disconnects, grounding Entire Lighting System SAFETY Repairs Disconnect Main on Cables ELighting + Egress Lighting | Aigner Electric | Oct 2018 - Dec 2018 |
| John Bourjailly Kitcher Fan Replacement Receptacle & Switch Upgrade Door Bell + Smart Exterior Camera Lighting | Aigner Electric | OCT 2018 |
| Mike Goebel Residential Garage Lighting, Trench outside Convenience Cable for Receptacles | Aigner Electric | Nov 2018 |
| Total Experience on This Page (In Months): | | |

Aigner
Last Name

Kristopher
First Name

BBS Certification ID


SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?
 Yes No
 If you answered "Yes" please explain below:
2. Have you served in the U.S. armed services? (If No, skip question 3)
 Yes No
3. If YES, were you discharged under honorable conditions?
 Yes No
 If you answered "No" please explain below:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: 

Subscribed and duly sworn before me according to law, by the above named applicant this day 3 of November in the year 2022 at Cuyahoga Farms, County of Cuyahoga and State of Ohio.

Notary Public: 



DAVID AWAD
NOTARY PUBLIC - OHIO
MY COMMISSION EXPIRES
01-14-27

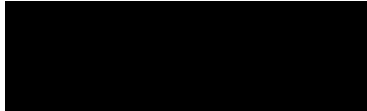


Department of Commerce

Division of Industrial Compliance
Ohio Construction Industry
Licensing Board O.C.I.L.B.

Mike DeWine
Sheryl Maxfield

AIGNER, KRISTOPHER J



| | | |
|--|---|---|
| Mike DeWine Governor | Electrical CONTRACTOR'S LICENSE | Sheryl Maxfield Director |
| Ohio License # 34530 | Expiration Date: 12/31/2022 | |
| KRISTOPHER J AIGNER AIGNER ELECTRIC OWNER | | |
| <i>Carol Ross</i> | | <i>William Koester</i> |
| Carol A. Ross Board Secretary | | William Koester Administrative Chairperson |

This is YOUR license. Plan Approvals obtained with YOUR license and posting of YOUR license indicates that YOU and YOUR liability insurance are assuming all responsibility for any projects performed under this license.

| | | |
|---|--|---|
| Mike DeWine Governor | Electrical CONTRACTOR'S LICENSE KRISTOPHER J AIGNER AIGNER ELECTRIC OWNER Ohio License# 34530 Expiration Date: December 31, 2022 | Sheryl Maxfield Director |
| LICENSE MUST BE POSTED ON JOB SITE | | LICENSE MUST BE POSTED ON JOB SITE |
| <i>Carol Ross</i> Carol A. Ross Board Secretary | | <i>William Koester</i> William Koester Administrative Chairperson |

File Attachments for Item:

P-3 Cunningham, Robert - ESI

Cert ID:

Current Certifications: None

Staff Notes: Received after ESIAC submission, recommend approval.

Committee Recommendation:

Cunningham

Robert

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Cunningham

Robert

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| DEER PARK HIGH SCHOOL | 1985 |
| Related Vocational or Technical Training | Years' Experience |
| IEC APPRENTICESHIP PROGRAM GRADUATED 1999 | 4 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Cunningham

Robert

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|---|--|-----------------------------------|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Greater Cincinnati Airport - Journeyman Delta Airlines Control Center Install Conduit System from substation and generator to new data center. Install Conduit System under Concourse B for Fiber Optics | Denier Electric 10891 OH-128 Harrison, OH 45030 | 1999 |
| Mitsubishi Mason Addition - Foreman Layout installation of 2 new 3000Amp Gears, Plant Lighting, and Power Distribution | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2001 |
| McAuley H.S. Addition - Foreman 3 Story Addition of the science wing and music rooms. Demo Gym and Cafeteria. Expand new Gym/Cafeteria. Layout of addition. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2002-2003 |
| Beechmont Subaru - Foreman Remodel of Car Dealership, Showroom, Offices Mechanic Shop, Body Shop. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2003 |
| Total Experience on This Page (In Months): | | 60 |

Cunningham

Robert

Last Name

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|----------------------------------|
| McAuley Auditorium - Foreman Complete Demo of Auditorium: Stage, Lights, Seating/ Install new Lighting Control Panel, Stage Lighting, Aisle, and Control Panel. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2004 |
| Greater Cincinnati Airport - Foreman Remove and relocate all terminal gates: Concourse A & B. Repair/Relocate Audio and Speaker Systems. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2004 |
| G.E. Aircraft Engines - Foreman Demo of two 4-story buildings. Design and Layout of new office space, offices, open office systems, Fire Alarm, Security Systems. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2004-2005 |
| Great Wolf Lodge - Foreman Layout/Design 8 Electric rooms Layout/Design 4 floors of hotel rooms, power distribution to rooms. Elevator control room Handicap systems/Lighting Control Systems. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2005-2006 |
| Project Sweet T - Lead Person Building for NSA Fort Gordon Build/Terminate Wire for 15-5000Amp Services, all with 100% UPS Backup Systems. Testing and Commissioning of all systems. | MC Dean 1765 Greensboro Station Place Tysons, VA 22102 | 2007 |
| Milford High School - Foreman 2 Floors Classrooms, New Kitchen, Ansul/Exhaust Hoods, Cooking Equipment, Coolers, Mechanical Rooms, Boilers, Air Handler Units | AC Electric 9866 Harrison Ave Harrison, OH 45030 | 2008-2009 |
| Industrial Systems - Lead Person Waste Water Treatment Plants Chemical | ICS 11355 Sebring Dr Cincinnati, OH 45240 | 2010-2012 |
| Field Project Manager for BHI. Managed 4 Palm Beach Tan new locations. Carpentry, Electric, HVAC, Life Safety Systems Demo to CO | Self - Employed | 2013-2014 |
| Pratt Industries - Foreman Power Distribution for Cardboard Plant. Design/Layout for Conduit Systems, Cardboard Producing Machines, Conveyors, Robots, Scrap Collection systems. (All machines from Europe.) | Kraft Electric 5710 Hillside Ave Cincinnati, OH 45233 | 2016-2017 |
| ADM - Foreman ADM Corporate Facility; Demo/Rework of Electrical Power & Lighting. Add Emergency Generator. Replace/Rewire 30 Rooftop Units | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2019 |
| Cincinnati Eye Institute - Foreman Medical Building out of the ground. New Service/Power Distribution/Layout of all Exam Rooms. | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2019-2020 |
| Amazon - Foreman Amazon Prototype Distribution Center Demarc Room, Data Center w/UPS System, Set Generator, Power Distribution throughout Building (900k' Bldg) | Denier Electric 10891 OH-128 Harrison, OH 45030 | 2020 |
| Everest Rehab Center - Foreman Layout of Hospital Bedrooms, Power to Rehab Equipment, Lighting Controls, Environmental Controls, Med Gas Control System. | Kenmarc Electric 1055 Heywood St Cincinnati, OH 45225 | 2020-2021 |
| Kings Mills - Foreman Small Strip Mall ground up; just a shell | Kenmarc Electric 1055 Heywood St Cincinnati, OH 45225 | 2021-2022 |
| Big Mikes Gas-n-Go - Foreman Gas Station out of the ground | Kenmarc Electric 1055 Heywood St Cincinnati, OH 45225 | 2022-Present |
| Total Experience on This Page (In Months): | | 226 |

Cunningham

Last Name

Robert

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty text box for explanation.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant:

Handwritten signature of Robert Cunningham

Subscribed and duly sworn before me according to law, by the above named applicant this

day 11 of 2 in the year 2022 at Warren, Lebanon, County of

Warren and State of Ohio

Notary Public:

Handwritten signature of Kristi Bennett



KRISTI M. BENNETT
Notary Public, State of Ohio
My Commission Expires
April 26, 2023

File Attachments for Item:

P-4 Julian, John - RBI

Cert ID: 8710

Current Certifications: None

Staff Notes: Additional information submitted. Recommend approval.

Committee Recommendation:

comp. you will...
 Building Standards...
 available to...
 this page

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JULIAN

JOHN

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | |
|---|---|---|
| <input type="checkbox"/> Res. Building Official | <input type="checkbox"/> Res. Plans Examiner | <input checked="" type="checkbox"/> Res. Building Inspector |
| | <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD (Mark "T" If Trainee)

| Description | | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|--------------------|---------------|
| Architectural Registration | | | | |
| P.E. Registration | | | | |
| Res | Non-Res | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | | |
| Building Plans Examiner Certification | | | | |
| Mechanical Plans Examiner Certification | | | | |
| Fire Protection Plans Examiner Certification | | | | |
| Electrical Plans Examiner Certification | | | | |
| Plumbing Plans Examiner Certification | | | | |
| Fire Protection Inspector Certification | | | | |
| Electrical Safety Inspector Certification | | | | |
| Plumbing Inspector Certification | | | | |
| Fire Safety Inspector Certification | | | | |
| Fire Protection System Designer Certification | | | | |
| Medical Gas Piping Inspector Certification | | | | |

Section 3: Employment/Education

| | | |
|--|--|-----------------------------|
| a. Formal Education | | Date Graduated |
| WEST GEAUGA HIGH SCHOOL | | MAY, 1987 |
| b. Related Vocational or Technical Training | | Years' Experience |
| N/A | | |
| c. U.S. Military construction experience (MOS or other designation): | | Years' Experience |
| N/A | | |
| d. Place of Employment: | | Years' Employed |
| CITY OF CLEVELAND HEIGHTS | | 5 YEARS AND 3 MONTHS |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JULIAN

JOHN

Last Name

First Name

BBS Certification ID

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|---|--|
| CITY OF CLEVELAND HEIGHTS | HOUSING INSPECTOR | Performs routine interior and exterior property maintenance inspections and re-inspections of all existing residential and commercial properties to enforce City,s adopted housing, building and zoning codes. Makes independent decisions regarding issuance of violation notices and compliance with the City's adopted housing and building codes. | 07/05/16, 5 YEARS AND 3 MONTHS |

SECTION 5: EXPERIENCE (Do NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|---|--|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| BUILDING AND HOUSING INSPECTIONS | City of Cleveland Heights 40 Severance Circle Cleveland Heights, OH 44118 216-291-5900 | JULY 2016-CURRENTLY 5YEARS 3 MONTHS |
| REHAB AND RENOVATION INSPECTOR FOR FREDDIE MAC AND FANNIE MAE | ASONS PROPERTY PRESERVATION AND CONSTRUCTION 1301 E Riggin Rd Muncie, IN 47303 765-282-2100 | NOVEMBER 2013-NOVEMBER 2016 3 YEARS |
| Total Experience on This Page (In Months): | | 99 MONTHS |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JULIAN

Last Name

JOHN

First Name

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|---|--|
| REHAB AND QUALITY CONTROL INSPECTIONS | CITYSIDE MANAGEMENT CORP. 77 Sundial Avenue Suite 148W Manchester, NH 03103 603-667-1000 | FEBRUARY 2010-NOVEMBER 2013 2 YEARS AND 10 MONTHS |
| 10806 PLYMOUTH, GARFIELD HTS, OH 44126 WHOLE HOUSE RENOVATION INCLUDING: INSTALLED VINYL SIDING, REPLACEMENT OF ALL WINDOWS, CARPENTRY-FRAMING, KITCHEN REMODEL INCLUDING NEW CABINETS- ELECTRICAL- PLUMBING, GARAGE ROOF REPLACEMENT INCLUDING ALL WOOD MEMBERS, BATHROOM INSTALLATION | JULIAN INSTALLATIONS 12662 HAROLD DR CHESTERLAND, OHIO 44026 PROPERTY OWNER: TOVIS PROPERTIES LLC/ BRIAN DAVIS 23660 MILES RD SUITE 201 BEDFORD HTS, OH 44128 330-459-3255 | JANUARY 2009-JUNE 2009 5 MONTHS |
| 37 NATALIE RD, BEDFORD, OH 44146 WHOLE HOUSE RENOVATION INCLUDING: CARPENTRY, FRAMING, REPLACEMENT OF ALL WINDOWS, REPLACED ALL EXTERIOR DOORS INCLUDING FRAMING, BROUGHT ALL ELECTRICAL-PLUMBING-AND HEATING UP TO CODE FOR ENTIRE STRUCTURE, REPLACED ENTIRE GARAGE ROOF | JULIAN INSTALLATIONS 12662 HAROLD DR CHESTERLAND, OHIO 44026 PROPERTY OWNER: TOVIS PROPERTIES LLC/ BRIAN DAVIS 23660 MILES RD SUITE 201 BEDFORD HTS, OH 44128 330-459-3255 | JUNE 2008-OCTOBER 2008 4 MONTHS |
| 65 NORDHAM DR, BEDFORD, OH 44146 WHOLE HOUSE RENOVATION INCLUDING: CARPENTRY-FRAMING, INSTALLED VINYL SIDING, REPLACEMENT OF ALL WINDOWS, KITCHEN REMODEL INCLUDING NEW CABINETS-COUNTERS-SINK- ELECTRICAL- PLUMBING | JULIAN INSTALLATIONS 12662 HAROLD DR CHESTERLAND, OHIO 44026 PROPERTY OWNER: TOVIS PROPERTIES LLC/ BRIAN DAVIS 23660 MILES RD SUITE 201 BEDFORD HTS, OH 44128 330-459-3255 | SEPTEMBER 2007-DECEMBER 2007 3 MONTHS |
| Total Experience on This Page (In Months): | | 46 MONTHS |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JULIAN

JOHN

Last Name

First Name

BBS Certification ID

SECTION 6: PERSONAL HISTORY

- 1. Have you ever been convicted of any felony, or any crime involving moral turpitude? Yes No
 - 2. If you answered "Yes" please explain below:
 - 3. Have you served in the U.S. armed services? (If No, skip question 3) Yes No
 - 4. If YES, were you discharged under honorable conditions? Yes No
- If you answered "No" please explain below:

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SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: John M Julian

Subscribed and duly sworn before me according to law, by the above named applicant this day 18th of October in the year 2021 at Cleveland Heights, County of Cuyahoga and State of Ohio.

Notary Public: Pamela Roessner



PAMELA L. ROESSNER
Attorney At Law
NOTARY PUBLIC
STATE OF OHIO
My Commission Has
No Expiration Date
Section 147.03 O.R.C.

Foley, Megan

From: J J [REDACTED]
Sent: Sunday, October 30, 2022 6:09 PM
To: Foley, Megan; Butts, Pamella
Subject: RE: Residential Building Inspector certification
Attachments: BOND INFO.pdf; Certificate of Liability Insurance 1.pdf; Certificate of Liability Insurance 2.pdf; John Julian Resume 2022.pdf

Hello Megan,

I believe we had a conversation or it may have been with Pamella Butts late last year-early this year about additional information about my application for Interim Certification of Residential Building Department Personnel. I received a letter stating that the board would like more information. You asked me to outline my work experience as a contractor so I hope its not to late for that info and my apologies that it took so long but this year has flown by. I'm hoping I can still submit that information that the board requested in this email. See below and attached.

I was self employed from roughly 1997-2010 as a general contractor and residential remodeling contractor as Julian Installations/John Julian. I usually had two to three people working for me as laborers I performed work as well as oversaw their work. I worked as a carpenter doing rough in framing for roofs, windows and doors, also installing roofs and different siding (aluminum, vinyl, wood, hardy, etc) that was all work subject to inspection. And as outlined in my application I've also Installed kitchens and baths many of those jobs had work subject to inspection such as rough in plumbing, carpentry, kitchen and bath remodels, etc. My experience as a contractor was from Jan 1997- June 2010 / 12.5 years / 150 months. I've also attached a couple Insurance certificates, a bond certificate and my resume. I have well over the amount of 3 years experience for this application and would like to be considered for the interim certification.

Respectfully,

John Julian
[REDACTED]

Sent from [Mail](#) for Windows

From: Megan.Foley@com.state.oh.us
Sent: Monday, October 25, 2021 8:49 AM
To: [REDACTED]
Subject: RE: Residential Building Inspector certification

Hi John,
You will receive a letter: the Board has requested some additional information on your application.

Meg Foley
Professional Development Coordinator
Board of Building Standards
Department of Commerce
614.644.3779
mfoley@com.state.oh.us
<https://www.com.ohio.gov/dico/bbs/>

coronavirus.ohio.gov

Thanks for your patience while our staff works remotely to stop the community spread of COVID-19.

This message and any response to it may constitute a public record and thus may be publicly available to anyone who requests it.

From: J J [REDACTED]
Sent: Friday, October 22, 2021 4:35 PM
To: Foley, Megan <Megan.Foley@com.state.oh.us>
Subject: Re: Residential Building Inspector certification

Will I be contacted by email or by mail of the status?

John

On Oct 19, 2021, at 9:21 AM, Megan.Foley@com.state.oh.us wrote:

Hi John,

Yes, we received your email and we are adding you to this week's agenda.

Meg Foley
Professional Development Coordinator
Board of Building Standards
Department of Commerce
614.644.3779
mfoley@com.state.oh.us
<https://www.com.ohio.gov/dico/bbs/>

coronavirus.ohio.gov

Thanks for your patience while our staff works remotely to stop the community spread of COVID-19.

This message and any response to it may constitute a public record and thus may be publicly available to anyone who requests it.

From: J J [REDACTED]
Sent: Tuesday, October 19, 2021 8:47 AM
To: J J [REDACTED]
Cc: Foley, Megan <Megan.Foley@com.state.oh.us>; Jones, Amy <Amy.Jones@com.state.oh.us>
Subject: Re: Residential Building Inspector certification

Just checking if you received my email I sent with the copy of my application yesterday. I mailed in the hard copy with my check yesterday also.
Sorry for being a pain.

John

On Oct 18, 2021, at 12:22 PM, J J [REDACTED] wrote:

I've attached a pdf copy of my application, Thank you so much for all your help.

John

On Oct 18, 2021, at 9:27 AM, Megan.Foley@com.state.oh.us wrote:

Hello,
Send it to Board of Building Standards, 6606 Tussing Road, PO Box 4009,
Reynoldsburg, Ohio 43068
If you would like to also email a copy the Board meets this week, and
we can get you on the agenda – if approved, you would be approved
pending receipt of hard copy and fees. You can do that in reply to all to
this email, and Amy and I will process it.

Meg Foley
Professional Development Coordinator
Board of Building Standards
Department of Commerce
614.644.3779
mfoley@com.state.oh.us
<https://www.com.ohio.gov/dico/bbs/>

JOHN JULIAN



Housing/Building Inspector

- Broadly trained experienced housing/building Inspector with hands on experience in many different aspects of the housing/building industry

Work Experience

HOUSING INSPECTOR

THE CITY OF CLEVELAND HEIGHTS JULY 2016 TO PRESENT

- Inspected residential and commercial buildings during various stages of construction, installation, and remodeling; makes independent decisions and reports to housing director regarding compliance with codes and ordinances of City, State, and Federal agencies.
- Inspected buildings undergoing business change of use or occupancy, in regard to compliance with the city's adopted building codes confers with architects, contractors, builders, and the public to explain and interpret city building code requirements.
- Inspected structural, electrical, plumbing, and mechanical systems and respective components.
- Performed point of sale-rental- business- routine exterior- and general maintenance inspections.
- Prepared reports and maintained files of inspections
- Engaged with agents, homeowners, and tenants to effectively meet corrective action for compliance.
- Works well with other colleagues and city personnel and maintained regular attendance and punctuality.

QUALITY FIELD REPRESENTATIVE

ASONS PROPERTY PRESERVATION AND CONSTRUCTION 2013 TO 2016

- Responsible for the Quality and Development of Field Service Management for Freddie Mac and Bank Owned Property Management, loss mitigation/prevention, quality control and quality issues

FIELD INSPECTOR / QUALITY CONTROL INSPECTOR

CITYSIDE MANAGEMENT CORPORATION 2010 TO 2013

- Responsible for the Field Service Management inspections for the Secretary of Housing and Urban Development and Bank Owned property management.

SELF EMPLOYED HOME IMPROVEMENT AND MAINTENANCE SPECIALIST

JULIAN INSTALLATIONS 1997 TO 2010

- Self-employed owner of home improvement and maintenance company, siding, windows, gutters, carpentry, plumbing, electrical, etc. Responsible for sales and delegating responsibilities to subcontractors as well as performing work on various jobsites.

Education High School Diploma

Proficient in MS Word, Excel, Power Point, Outlook, and other computer related software.

File Attachments for Item:

P-5 Langdon, Raymond - BO

Cert ID: 4800

Current Certifications: BI, RBO, RBI

Staff notes: Review experience.

Committee Recommendation:

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Langdon
Last Name

Raymond
First Name

4800
BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|---|--|--|--|---|
| <input checked="" type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|--|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | 4800 <small>Interim10-06-17, Full 1-12-21</small> |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Building Inspector Certification | 4800 <small>Res 6-26-13- Com 3-18-19</small> |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Langdon
Last Name

Raymond
First Name

4800
BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| Ohio State GED | 1990 |
| Related Vocational or Technical Training | Years' Experience |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |
| City of Elyria Building Dept. | 8 years |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|--|---|--|
| City of Elyria Building Dept. | Commercial Building Inspector Back up RBO | Conducting residential and commercial inspections, confirming compliance with the approved documents and certificate of plan approval. Reviewing residential plans to confirm compliance with the residential code. Issuance of adjudication, denial and stop work orders as applicable. Issuing Certificates of plan approval and subsequent residential certificates of completion/occupancies. Copies of issued documents attached for consideration. | 2017- 2022 |

Langdon

 Last Name

Raymond

 First Name

4800

 BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|-----------------------------------|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Langdon
Last Name

Raymond
First Name

4800
BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|--|-----------------------------------|
| | | |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Langdon
Last Name

Raymond
First Name

4800
BBS Certification ID

SECTION 8: PERSONAL HISTORY

- 1. Have you ever been convicted of any felony, or any crime involving moral turpitude? Yes No

If you answered "Yes" please explain below:

- 2. Have you served in the U.S. armed services? (If No, skip question 3) Yes No
- 3. If YES, were you discharged under honorable conditions? Yes No

If you answered "No" please explain below:

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SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Raymond Langdon

Subscribed and duly sworn before me according to law, by the above named applicant this day 31st of October in the year 2022 at Elyria, County of Lorain and State of Ohio

Notary Public: Mary L. Tomski

SEAL



MARY L. TOMSKI
Notary Public
and for the State of Ohio
My Commission Expires
January 6, 2023

Residential Certificate of Plan Approval

Office of the Building Official City of Elyria

| | | |
|--|--|---|
| Property Address: <u>154 Irondale St. Elyria, OH 44035</u> Existing lot of record | | Certificate No. 2018-01 R. L. |
| Scope of Project: <input checked="" type="checkbox"/> Proposed New Structure <input type="checkbox"/> Proposed Change of Occupancy <input type="checkbox"/> Proposed Alteration <input type="checkbox"/> Proposed Addition <input type="checkbox"/> Other | Description of proposed work <u>New Single Family Home</u> | Owner Name / Address: (ORC 3791.04) <u>Road To Hope Inc.</u> <u>158 Irondale St.</u> <u>Elyria, OH 44035</u> |
| Scope of Plan Approval: Phased approval Annual approval Full approval -X Nonconformance approval Conditional approval | Note: Plans approved indicate a five bedroom single family home with no sleeping quarters located in the basement. | Conditions & Variances: Note: It shall be the owner or owners Authorized agents responsibility to assure All <u>sub-permits</u> are obtained, (i.e.: <u>Electrical, Plumbing & Heating</u>) prior to installation. <u>Warning: Beginning work without permit in hand shall result in payment of a double fee (\$1317.07, Elyria Codified Ordinances).</u> Attached; dwelling definitions and off street parking requirements. |
| USE GROUP R-3 | | This approval is conditional upon proceeding with construction in accordance with the approved construction documents. The building official shall be notified of any changes from the approved construction documents. Such changes shall be submitted and approved by the building department prior to their implementation; Sections 105.2, 106, 107.4.2, & 107.6.1 of the Residential Code of Ohio. (RCO). <i>The approval is invalid if construction work has not commenced within 12 months. One extension shall be granted for an additional 12-month period if requested by the owner at least 10 days in advance of the expiration of the approval and upon payment of a fee not to exceed \$100.00. (RCO 105.3)</i> <i>If in the course of construction, work is delayed or suspended for more than 6 months, the approval is invalid. Two extensions shall be granted for 6 months each if requested by the owner at least 10 days in advance of the expiration of the approval and upon payment of a fee for each extension of not more than \$100.00. (RCO 105.4)</i> |
| Description(s) <u>New Single Family Dwelling</u> | | |
| Special Provisions: 1. <u>Call for all the required Inspections as specified in Section 108. of the 2013 RCO.</u> See attached list of required inspections | | This Certificate is issued pursuant to the provisions of Section 105 and 107 RCO. This <u>certificate shall be posted (RCO 107.5.2)</u> in a conspicuous location outside of the building and in the front part of the premises on which, or will be, located the building or equipment to which the approved plans relate. This Certificate indicates conformance with the applicable provisions of the RCO and Chapters 3781 And 3791 of the Revised Code. |
| Type of Construction: <u>Wood Frame 5-B</u> Fire Protection Systems: <input type="checkbox"/> N/A <input type="checkbox"/> Required <input type="checkbox"/> Non-Required <input type="checkbox"/> Sprinkler <input type="checkbox"/> Other _____ <input type="checkbox"/> NFPA 13R | | |
| RCO, Section 401.3 Drainage: (Final Grade Approval) ECO, 1389 Grading permit / approval required: <u>Copy of Engineering Department review attached.</u> | | Approved pursuant to the following edition of the RCO: 2013 |
| RCO, Section 401.3 Drainage: (Final Grade Approval) ECO, 1389 Grading permit / approval required: <u>Copy of Engineering Department review attached.</u> | | Residential Official <u><i>[Signature]</i></u> #4000 Date: <u>2-2-18</u> |



CITY OF ELYRIA

DEPARTMENT OF ENGINEERING
Office 440-326-1444 ~ Fax 440-326-1441

PLAN REVIEW

PROJECT NAME: Hope House
PROJECT ADDRESS: 154 Irondale
PROJECT DESCRIPTION: Hope House
DATE: 5-23-18

| STORMWATER | PRE-DEVELOPMENT | POST-DEVELOPMENT | SQ FEET: | Existing | Proposed |
|---------------|-----------------|--------------------------|---------------|----------|-------------------------------------|
| IMPERVIOUS | | | NEW | | <input checked="" type="checkbox"/> |
| PERVIOUS | | | ADDITION | | <input type="checkbox"/> |
| TOTAL ACREAGE | | EARTH DISTURBED <u>1</u> | REDEVELOPMENT | | <input type="checkbox"/> |

STORMWATER

STORMWATER PERMIT REQUIRED NOT REQUIRED < 1 Acre
 SWPPP SUBMITTED REQUIRED NOT REQUIRED > 1 Acre
 SIGNED AND STAMPED BY P.E. YES NO > 5 Acre
 EROSION & SEDIMENT CONTROL REQUIRED YES NO

COMMENTS:

DRIVE APPROACH

NO. OF COMMERCIAL DRIVE APPROACHES 0 PERMITS REQUIRED YES NO
 NO. OF PERMITS

UTILITIES

EXCAVATION IN STREET YES NO ENGINEERING PERMIT REQUIRED YES NO
 COMMENTS: If utilities extend into Right of Way, a permit will be required.

FLOODPLAIN

FLOODPLAIN DEVELOPMENT PERMIT REQUIRED YES NO

SANITARY CONNECTION FEE

METER SIZE _____
 CONNECTION FEE _____ BASED ON: METER SIZE SQ. FOOTAGE _____ Sq. Ft.
 FEE CREDIT _____ FOR _____
 IMPACT FEE _____
 TOTAL SANITARY FEE 1500 UNPAID PAID, RECEIPT NO: _____
 NO ADDITIONAL FEE REQUIRED

GRADING

APPROVED
 APPROVED WITH CONDITIONS PROPOSED GRADING SHALL NOT ADVERSELY AFFECT ABUTTING PROPERTIES OR CAUSE A NUISANCE.
 NOT APPROVED
 NOT APPLICABLE

COMMENTS: Drainage plan required. Utilities plan (water/sewer/storm) needed. Re-using existing or providing new?

ADDITIONAL INFORMATION REQUIRED YES NO
 RESUBMITTAL REQUIRED YES NO

Kayman
PLAN REVIEWER

SECTION 108

INSPECTION PROCESS

108.1 General. After residential construction documents have been approved, construction or work may proceed in accordance with the approved documents. Construction or work for which an approval is required shall be subject to inspection. It shall be the duty of the owner or the owner's duly authorized representative to notify the residential building department when work is ready for inspection. Access to and means for inspection of such work shall be provided for any inspections that are required by this code. It shall be the duty of the owner or the owner's authorized representative to cause the work to remain accessible and exposed for inspection purposes. Such construction or work shall remain accessible and exposed for inspection purposes until the work has been inspected to verify compliance with the approved construction documents, but failure of the inspectors to inspect the work within four days, exclusive of Saturdays, Sundays, and legal holidays, after the work is ready for inspection, allows the work to proceed. Subsequent work is allowed to proceed only to the point of the next required inspection.

108.2 Required inspections. At the time that the certificate of plan approval is issued, the residential building official shall provide to the owner, or the owner's representative, a list of all required inspections for each project. The required inspection list shall be created from the applicable inspections set forth in Sections 108.2.1 to 108.2.12. The residential building official, upon notification from the owner or the owner's agent that the work is ready for inspection, shall cause the inspections set forth in the required inspection list to be made by an appropriately certified residential inspector in accordance with the approved residential construction documents.

108.2.1 Lot line markers required. Before any work is started in the construction of a residential building or an addition to a residential building to which the rules of the board are applicable under Section 101.2, all boundary lines shall be clearly marked at their intersections with permanent markers or with markers which are offset at a distance which is of record with the owner.

108.2.2 Footing or foundation inspection. Footing and foundation inspections shall be made after excavations for footings are complete and any required reinforcing steel is in place. For concrete foundations, any required forms shall be in place prior to inspection. Materials for the foundation shall be on the job, except where concrete is ready mixed in accordance with "ASTM C 94," the concrete need not be on the job

108.2.3 Concrete slab and under-floor inspection. Concrete slab and under-floor inspections shall be made after in-slab and under-floor reinforcing steel and building service equipment, conduit, insulation, vapor retarder, piping accessories and other ancillary equipment items are in place, but before any concrete is placed or floor sheathing installed, including the subfloor.

108.2.4 Lowest floor elevation. The elevation certification required in Section 322 shall be submitted to the residential building official.

108.2.5 Frame inspection. Framing inspections shall be made after the roof deck or sheathing, all framing, fire blocking and bracing are in place and pipes, chimneys and vents to be concealed are complete and the rough electrical, plumbing, heating wires, pipes and ducts are approved.

108.2.6 Lath or gypsum board inspection. Lath and gypsum board inspections shall be made after lathing and gypsum board, interior and exterior, is in place, but before any plastering is applied or before gypsum board joints and fasteners are taped and finished.

Exception: Gypsum board that is not part of a fire-resistive assembly or a shear assembly.

108.2.7 Fire-resistant penetrations. Protection of joints and penetrations in fire-resistance-rated assemblies shall not be concealed from view until inspected and approved.

108.2.8 Energy efficiency inspections. Inspections shall be made to determine compliance with Chapter 11 and shall include, but not be limited to, inspections for: envelope insulation "R" and "U" values, fenestration "U" value, duct system "R" value, infiltration air barriers, caulking/sealing of openings in envelope and ductwork, and "HVAC" and water heating equipment efficiency.

108.2.9 Testing of residential building service equipment. Inspections shall be made of all residential building services equipment to ensure that it has been installed in accordance with the approved construction documents, the equipment listings, and the manufacturer's installation instructions. Inspections shall include, but not be limited to, inspections for the following systems and their associated components: mechanical heating and ventilating systems, mechanical exhaust systems, plumbing systems, fire protection systems, and electrical systems.

108.2.10 Other inspections. In addition to the inspections specified above, the residential building official is authorized to cause to be made or require other inspections of any residential construction work to be made to ascertain compliance with the provisions of this code. Where applications are submitted for projects of unusual magnitude of construction, the building official may require inspections or full-time project representation by a registered design professional or inspection agency. This inspector/ project representative shall keep daily records and submit reports as required by the building official.

Exception: Where the building official requires full-time project inspection, the installation of a fire protection system may be inspected by a person certified under Section 3781.105 of the Revised Code. The person shall be certified in the appropriate subfield of fire protection systems being inspected – automatic sprinkler, fire alarm, or special hazards systems design.

Validity of a certificate-

111.4 Validity of a certificate of occupancy. *The certificate of occupancy represents an approval that is valid only when the residential building or structure is used as approved and certifies conformance with applicable provisions of the "Residential Code of Ohio for One-, Two-, and Three-family Dwellings" and Chapters 3781. and 3791. of the Revised Code. The approval is conditioned upon the building systems and equipment being maintained and tested in accordance with the approval, the "RCO," and applicable equipment and systems schedules.*

Use definition-

Dwelling. *Any building that exclusively contains one, two, or three dwelling units, each of which may be occupied by a family and no more than five lodgers or boarders, intended, or designed to be built, used, rented, leased, let or hired out to be occupied, or that is occupied for living purposes, physically separated from adjacent structures, and with an independent exit from each dwelling unit.*

Dwelling Unit. *A single unit providing complete independent living facilities for one or more persons, including permanent provisions for living, sleeping, eating, cooking and sanitation. The dwelling unit may include any accessory space intended for the exclusive use of the occupants of an individual dwelling unit such as a private garage, greenhouse, etc.*

Parking requirements-

1175.03 PARKING IN COS, R-LD, R-MD, R-UD, R-TH, R-MHL, R-MHH AND R-MHP DISTRICTS.

In any COS, R-LD, R-MD, R-UD, R-TH, R-MHL, R-MHH and R-MHP District, no off-street parking spaces shall be located within any required front yard on any lot except on an approved driveway leading to a side or rear yard parking space. Such driveway and parking space shall be suitably paved so as to provide a durable and dustless surface of asphalt, concrete, brick or other surface approved by the Building Inspector. The areas of the driveway in a front yard shall not exceed one-third of the area of such yard, and the width of such driveway shall not exceed twenty feet measured at the front lot lines. Permitted front yard parking shall include motor vehicles as defined in Section 301.20 of the Traffic Code, except trucks, tractors, or any other commercially licensed vehicle over one-ton capacity which are prohibited from parking in the COS, R-LD, R-MD, R-UD, R-TH, R-MHL, R-MHH and R-MHP Districts. (Ord. 99-275. Passed 12-6-99.)

1175.06 NUMBER OF SPACES REQUIRED.

Residential, Single Household--Two spaces for each dwelling unit.



Department
of Commerce

Ohio Board of Building Standards

John R. Keech, Governor
Jacqueline T. Williams, Director

RESIDENTIAL/INSTITUTIONAL OCCUPANCY QUESTIONNAIRE and CERTIFICATION

November 20, 2017

| CARE FACILITIES | | YES | NO | N/A |
|------------------------|--|-----|----|-----|
| 1 | Are any occupants receiving care? | | | X |
| | How many? | | | |
| a | Are any occupants receiving "personal care services"* as defined in the OBC? | | | X |
| | How many? | | | |
| b | Are any occupants receiving "custodial care"* as defined in the OBC? | | | X |
| | How many? | | | |
| c | Are any occupants receiving "medical care"* as defined in the OBC? | | | X |
| | How many? | | | |
| 2 | Are any occupants "incapable of self-preservation"* as defined in the OBC at any time while in the building? | | | X |
| | How many? | | | |
| 3 | Do any occupants need limited verbal or physical assistance to evacuate in an emergency situation? | | | X |
| | How many? | | | |
| 4 | Is the building held out to the public for and intended to provide housing/accommodation, care, and supervision? | | | X |
| 5 | Is care provided in a dwelling or dwelling unit which is the permanent residence of the care provider? | | | X |
| 6 | Is care provided in a dwelling unit? | | | X |
| 7 | Is care provided in a single-family dwelling? | | | X |
| 8 | Is care provided in a two- or three-family dwelling? | | | X |
| 9 | Is care provided in a building with more than three dwelling units? | | | X |
| 10 | Is care provided in a mixed occupancy building? | | | X |
| 11 | Is care provided in a building intended to be used for sleeping purposes? | | | X |
| 12 | Is the care being provided by a relative or guardian? | | | X |
| 13 | Is the care being provided in the residence of the care recipient? | | | X |
| 14 | Is care being provided in a building with shared exits? | | | X |
| 15 | Is care provided only in rooms located at the level of exit discharge? | | | X |
| 16 | Is an exit door that leads directly to the outside provided in the room where care is provided? | | | X |
| 17 | Are stairs required to be traversed when exiting from the room where care is provided? | | | X |
| 18 | Are any care recipients between the ages of newborn to 2.5 years? | | | X |
| | How many? | | | |
| 19 | Are any care recipients between the ages of 2.5 years to 12 th grade? | | | X |
| | How many? | | | |
| 20 | Are any of the care recipients adults? | | | X |
| | How many? | | | |
| 21 | Is care being provided in a place of worship? | | | |
| RESIDENTIAL FACILITIES | | YES | NO | N/A |
| 1 | Is the building intended to be used for sleeping purposes? | X | | |
| 2 | Are any of the occupants primarily transient? | | X | |

Better Codes / Better Buildings / Safer Ohio

Ohio Board of Building Standards
6606 Tussing Road
Reynoldsburg, OH 43068-9009

Gerald Holland, Chairman
An Equal Opportunity Employer and Service Provider

614-644-2613
Fax 614-644-3147
TTY/TDD 800-750-0750
com.ohio.gov/dico/bbs

| | | | | |
|-------------------------------|--|-----------|-----|----|
| 3 | Are guests staying in the primary residence of the building owner? | | X | |
| 4 | Are transient guests provided sleeping accommodations and meals for a fee? | | | X |
| 5 | How many sleeping units? | 1 | | |
| 6 | Are the occupants sleeping in a dwelling unit? | | | X |
| 7 | Are the occupants sleeping in a single-family dwelling? | | X | |
| 8 | Are the occupants sleeping in a two- or three-family dwelling? | | | X |
| 9 | Are the occupants sleeping in a building with more than three dwelling units? | | | X |
| 10 | Does the building share exits? | | | X |
| 11 | Is the building a mixed occupancy building? | | | X |
| CORRECTIONS/FACILITIES | | | YES | NO |
| 1 | Are any occupants locked or secured in the building? | How many? | | |
| 2 | Does the corrections facility allow free movement from sleeping areas, including egress from the building? | | | X |
| 3 | Does the corrections facility allow free movement from sleeping areas, except locked exits? | | | X |
| 4 | Does the corrections facility allow free movement within the smoke compartment with remote control locked exits? | | | X |
| 5 | Does the corrections facility restrict free movement from the sleeping units, and other spaces with remote control locked exits? | | | X |
| 6 | Does the corrections facility restrict free movement from occupied spaces with staff-controlled manual release? | | | X |

OWNER/OWNER'S AGENT/ADMINISTRATOR CERTIFICATION

The answers to the above questions have been provided to the best of my knowledge. I understand that the answers are needed in order to establish the risks, properly classify the building, and manage the risks to ensure the safety of the occupants. This questionnaire is part of the approved construction documents and should be submitted to the building official upon application for plan approval. It should be attached the certificate of occupancy to permanently establish the basis of the approval.

Signature: *JM Kamms* Date: 7-3-18
 Printed Name: JEFFREY M. KAMMS
 Employer: THE ROAD TO HOPE INC. Title: EXECUTIVE DIRECTOR

***DEFINITIONS:**

CUSTODIAL CARE. Assistance with day-to-day living tasks; such as assistance with cooking, taking medication, bathing, using toilet facilities and other tasks of daily living. Custodial care includes persons receiving care who have the ability to respond to emergency situations and evacuate at a slower rate and/or who have mental and psychiatric complications. Persons who receive custodial care may or may not require assistance with evacuation depending on the occupancy and/or the "condition" in the occupancy.

MEDICAL CARE. Care involving medical or surgical procedures, nursing or for psychiatric purposes.

PERSONAL CARE SERVICE. The care of persons who do not require medical care. Personal care involves responsibility for the safety of the persons while inside the building.

INCAPABLE OF SELF-PRESERVATION. Persons who, because of age, physical limitations, mental limitations, chemical dependency or medical treatment, cannot respond as an individual to an emergency situation to complete building evacuation.

Building Official

From: Geoffrey Smith
Sent: Monday, July 02, 2018 2:22 PM
To: Building Official
Cc: Kevin Brubaker; Erik Breunig; Scott Serazin
Subject: RE: Road to Hope

Ralph,

In follow up to our discussion regarding the single family home that Road to Hope is building it is my belief that it does not qualify as a Group Home under the City of Elyria Zoning Code. Clearly, even the building code allows up to five (5) unrelated individuals to reside in a home. My further understanding is that no medical treatment of any kind is being provided in the home.

As for the building code, we discussed classifying the house as R3 for building, not zoning code purposes. That seems appropriate and should there be any objections to those requirements, the applicant may appeal to the zoning board. I don't believe funding has any influence on decisions regarding this application.

Based on the above, and you are hereby advise that a single family home permit is to be issued with any requirements needed under a building code R3 classification.

Geoff

Geoffrey R. Smith
Administrative Legal Counsel
City of Elyria
131 Court Street, Suite 301
Elyria, Ohio 44035
440-326-1405

This message is intended solely for the recipient to which it is addressed. If you are not the intended recipient, you should not disclose, distribute or copy this email. Please notify the sender immediately by email and delete this email from your system.

From: Building Official
Sent: Monday, July 02, 2018 10:05 AM
To: Geoffrey Smith <gsmith@cityofelyria.org>
Subject: Road to Hope

Can we meet this afternoon?

Ralph Cantu
Building Official
City of Elyria

Temporary Certificate of Occupancy
Office of the Building Official

Road to Hope Inc.

158 Irondale St.
Elyria, OH 44035

Approved As:

- Pre-Existing Condition
- X New Structure**
- Alteration
- Change of Occupancy
- Temporary Occupancy

Use Groups:

- Primary: **R-5**
- Accessory: **N/A**
- Accessory:
- Mixed Uses:

Building Category:

Single Family Home

Construction Type: 5B

Zoning District: R-TH

Issued Pursuant to 1317.09 ECO

Stipulations, Conditions, Variances:

Temporary Certificate of Occupancy Granted
1500 Sq. Ft. Single Family Home

1. Complete ramp at the rear of the house.
2. complete landing at the top of the exterior stairway leading from basement to ground level.
3. seal all penetrations through drywall throughout.(install hardware/cameras).
5. fix bedroom windows(hard to open).
4. final grade approval though the city's Engineering Dept.

Complete items prior to 04/15/2019

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Permit # 2018-00001339

Approved pursuant to the following editions of:

2013 RCO

This approval is limited to the following portion of the

THE ENTIRE BUILDING

The balance of the building is approved the following the completion of items 1 through 2.

Date: **08 March 2019**



Residential Building Official

Certificate of Occupancy
Office of the Building Official

Road to Hope Inc.
154 Irondale St.
ELYRIA, OHIO 44035

Stipulations, Conditions, Variances:

OCCUPANCY OF A NEW 1500 Sq. Ft. HOME.



Approved As:

Pre-Existing Condition (No Change)

X New Structure

Alteration

Change of Occupancy

Temporary Occupancy

Use Group:

Building Category:

Primary: **R**

Single Family Home

Accessory: N/A

Accessory:

Mixed Uses:

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791. of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Construction Type: 5B

Permit # **2018-00001339**

Zoning District: R-MD

Approved pursuant to the following editions of:

2013 RCO

This approval is limited to the following portion of the
ENTIRE HOME SINGLE FAMILY HOME

The balance of the building is approved pursuant to the following dated C of O's:

Date: **August 2, 2019**

Issued Pursuant to 1317.09 ECO



Residential Building Official

Temporary Certificate of Occupancy
Office of the Building Official

PHRHL CONTRACTORS, LLC
376 SOMMER WAY
Elyria, OH 44035

Stipulations, Conditions, Variances:

Temporary Certificate of Occupancy Granted

1. PROVIDE COMPLETED BLOWER DOOR TEST RESULTS SIGNED BY CERTIFIED TECHNICIAN.
2. CAUSE TO HAVE FINAL INSPECTION CONDUCTED OF NATURAL GAS FUELED HOT WATER TANK TO BE INSTALLED.

TEMPORARY OCCUPANCY WILL EXPIRE ON 7/18/2019

Approved As:

X *New Structure*

Use Groups:

Building Category:

Primary: R-5

DUPLEX

Accessory: N/A

Accessory:

Mixed Uses:

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Construction Type: 5B

Permit # 2018-00001285

Zoning District: R-PUD

Approved pursuant to the following editions of:

2013 RCO

This approval is limited to the following portion of the
THE ENTIRE BUILDING

Issued Pursuant to 1317.09 ECO

Permanent Certificate of Occupancy will be issued following the completion of items 1 through 2.

Date: 21 December 2018


Residential Building Official

Temporary Certificate of Occupancy
Office of the Building Official

| | | |
|--|---------------------------|--|
| DALE YOST CONSTRUCTION CO 627 WAYNE ST. ELYRIA, OH 44035 | | Stipulations, Conditions, Variances: Temporary Certificate of Occupancy Granted 1. Complete final grade with Engineering Dept. approvals. 2. Submit Blower Door Test indicating compliance with 2013 RCO 3. Excavate foundation walls at two locations on opposing walls to footer depths for inspection to confirm complaint depth of footing. |
| Approved As: Pre-Existing Condition <input checked="" type="checkbox"/> <u>New Structure</u> Alteration Change of Occupancy Temporary Occupancy | | This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules. This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards. |
| Use Groups: | Building Category: | |
| Primary: R-5 | Single Family Home | |
| Accessory: N/A | | |
| Accessory: | | |
| Mixed Uses: | | |
| Construction Type: 5B | | Permit # 2018-00001414 |
| Zoning District: R-MD | | Approved pursuant to the following editions of: |
| <input type="checkbox"/> | <input type="checkbox"/> | <u>2013</u> RCO |
| <input type="checkbox"/> | <input type="checkbox"/> | This approval is limited to the following portion of the |
| Issued Pursuant to 1317.09 ECO | | THE ENTIRE BUILDING |
| | | The balance of the building is approved the following the completion of items 1 through three. |
| | | Date: 30 November 2018 |
| | |  Residential Building Official |

Certificate of Occupancy
Office of the Building Official

Road to Hope Inc.
154 Irondale St.
ELYRIA, OHIO 44035

Stipulations, Conditions, Variances:

OCCUPANCY OF A NEW 1500 Sq. Ft. HOME.



Approved As:

Pre-Existing Condition (No Change)

X New Structure

Alteration

Change of Occupancy

Temporary Occupancy

Use Group:

Building Category:

Primary: **R**

Single Family Home

Accessory: N/A

Accessory:

Mixed Uses:

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791. of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Construction Type: 5B

Permit # 2018-00001339

Zoning District: R-MD

Approved pursuant to the following editions of:



2013 RCO

This approval is limited to the following portion of the
ENTIRE HOME SINGLE FAMILY HOME

The balance of the building is approved pursuant to the following dated C of O's:

Date: **August 2, 2019**

Issued Pursuant to 1317.09 ECO


Residential Building Official

Temporary Certificate of Occupancy
Office of the Building Official

Road to Hope Inc.

158 Irondale St.
Elyria, OH 44035

Approved As:

Pre-Existing Condition

X New Structure

Alteration

Change of Occupancy

Temporary Occupancy

Stipulations, Conditions, Variances:

Temporary Certificate of Occupancy Granted
1500 Sq. Ft. Single Family Home

1. Complete ramp at the rear of the house.
2. complete landing at the top of the exterior stairway leading from basement to ground level.
3. seal all penetrations through drywall throughout.(install hardware/cameras).
5. fix bedroom windows(hard to open).
4. final grade approval though the city's Engineering Dept.

Complete items prior to 04/15/2019

Use Groups:

Building Category:

Primary: **R-5**

Single Family Home

Accessory: **N/A**

Accessory:

Mixed Uses:

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Construction Type: 5B

Permit # 2018-00001339

Zoning District: R-TH

Approved pursuant to the following editions of:

2013 RCO

This approval is limited to the following portion of the

THE ENTIRE BUILDING

Issued Pursuant to 1317.09 ECO

The balance of the building is approved the following the completion of items 1 through 2.

Date: **08 March 2019**


Residential Building Official

Partial Certificate of Occupancy- RCO 111.1.3
Office of the Building Official

RYAN HOMES

301 Fairfield Ct..
Elyria, Oh. 44035

Approved As:

- Pre-Existing Condition
- X New Structure**
- Alteration
- Change of Occupancy
- Temporary Occupancy

Use Groups:

Building Category:

Primary: **R-5**

Single Family Home

Accessory: **N/A**

Accessory:

Mixed Uses:

Construction Type: 5B

Zoning District: R-MD

Issued Pursuant to 1317.09 ECO

Stipulations, Conditions, Variances:

Temporary Certificate of Occupancy Granted

2360 Sq. Ft. Single Family Home

1. This partial occupancy permits the use of the structure for the purpose of showing the home for sale and is not intended to permit the permanent occupancy of the structure prior to removing office space from the garage area and causing to have inspections made by the Cities Building Department to ensure compliance with local codes prior to full occupancy.

Complete items prior 12/21/2019

This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules.

This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards.

Permit # 2019-00001085

Approved pursuant to the following editions of:

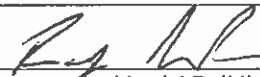
2013 RCO

This approval is limited to the following portion of the

THE ENTIRE BUILDING


The balance of the building approved following the completion of items 1 **Stipulations, Conditions, Variances.**

Date: **June 21, 2019**



Residential Building Official

Partial Certificate of Occupancy- RCO 111.1.3
Office of the Building Official

| | | |
|---|---|--|
| RYAN HOMES 301 Fairfield Ct. Elyria, Oh. 44035 | | Stipulations, Conditions, Variances: Temporary Certificate of Occupancy Granted 2360 Sq. Ft. Single Family Home 1. This partial occupancy permits the use of the structure for the purpose of showing the home for sale and is not intended to permit the permanent occupancy of the structure prior to removing office space from the garage area and causing to have inspections made by the Cities Building Department to ensure compliance with local codes prior to full occupancy. <u>Complete items prior 12/21/2019</u> |
| Approved As: Pre-Existing Condition <input checked="" type="checkbox"/> <u>New Structure</u> Alteration Change of Occupancy Temporary Occupancy | | |
| Use Groups: | | This Certificate represents an approval that is valid only when the building and its facilities are used as stated and is conditional upon all building systems being maintained and tested in accordance with the applicable Ohio Board of Building Standards rules and applicable equipment or system schedules. This certifies conformance with Chapters 3781. and 3791, of the Revised Code and the applicable provisions of the rules of the Ohio Board of Building Standards. |
| Primary: | Building Category: Single Family Home | |
| Accessory: | | |
| Accessory: | | |
| Mixed Uses: | | |
| Construction Type: 5B | | Permit # 2019-00001085 Approved pursuant to the following editions of: <u>2013</u> RCO |
| Zoning District: R-MD | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | This approval is limited to the following portion of the THE ENTIRE BUILDING |
| Issued Pursuant to 1317.09 ECO | | |
| | | The balance of the building approved following the completion of items 1 Stipulations, Conditions, Variances. |
| | | Date: June 21, 2019 |
| | |  Residential Building Official |



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department

131 Court St. Suite 101

Elyria, OH 44035

(Plan Review)

Adjudication Order No. R2017-001 R.L.

Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: December 5, 2017
Owner: Jan Kleinburg, Trustee
239 Brandtson Ave.
Elyria, OH. 44035

Contractor: JSD Construction
352 Lowell St.
Elyria, OH. 44035

Project: 239 Brandtson Ave. Elyria, OH 44035
(10' X 20' addition)

In response to an Application for Plan Approval, received 12/01/17, the plans have been reviewed to determine compliance with the 2013 Residential Code of Ohio. Based on our review, we must deny your request to approve the plans as submitted. We have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|---|---|--|
| 1. | 106.1.3 (Information on the Construction Documents) | The construction documents submitted lack required information: 106.1.3 Information on the Construction. Documents: Residential construction documents shall be dimensioned and drawn upon suitable material. Electronic media documents are permitted to be submitted when approved by the residential building official. Construction documents shall be coordinated and of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this code. Construction documents, adequate for the scope of the project, shall include information necessary to determine compliance with this code. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 2. | 106.1.3 (2) Information on the Construction Documents (Site Plan) | Required site plan was not submitted: 106.1.3 (2) Site Plan: A site plan showing a north orientation arrow, the size and location of new residential construction and all existing structures on the site, all property and interior lot line locations with setback and side yard dimensions and distances from buildings to lot lines, the locations of the nearest streets, the established street grades, the locations, types and sizes of all utility lines, the location of any fences, and the elevations of all proposed finished grades; and it shall be drawn in accordance with an accurate boundary line survey. In the case of demolition, the site plan shall show construction to be demolished and the location and size of existing structures and construction that are to remain on the site or plot. The residential building official is authorized to waive or modify the requirement for a site plan when the application for approval is for alteration or repair or when otherwise warranted. | Submit dimensioned site plan with sufficient detail for compliance to be determined. |
| 3. | 106.1.3 (3) Information on the Construction Documents (floor plan) | The construction documents submitted lack detailed floor the required floor plan. 106.1.3 (3) Floor Plans: Complete floor plans, including plans of full or partial basements and full or partial attics. Floor plans must show all relevant information such as door swings, stairs and ramps, windows, shafts, all portions of the means of egress, etc., and shall be sufficiently dimensioned to describe all relevant space sizes. Wall materials shall be described by cross-hatching (with explanatory key), by notation, or by other clearly understandable method. Spaces must be identified by how each space is intended to be used. | Submit floor plans with sufficient detail for compliance to be determined. |

www.cityofelyria.org

City of Elyria Building Department
 131 Court St. Suite 101
 Elyria, OH 44035
 (Plan Review)
 Adjudication Order No. R2017-008 D.F.
 Residential Code of Ohio, Section 109

Pg. 2 of 2

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|--|---|--|
| 4. | 016.1.3 (4) (Exterior Envelope) | The construction documents submitted lack required detail of the exterior envelope. 016.1.3 (4) Exterior wall Envelope: The exterior envelope shall be described in sufficient detail to determine compliance with this code and the referenced standards. Details or elevations shall be provided which describe floor to floor dimensions, flashing, intersections with dissimilar materials, corners, end details, control joints, intersections at roof, eaves, or parapets, means of drainage, water-resistant membrane, details around openings, location and type of vapor retarders, window and door "U"-values, and insulation location and "R"-values. The supporting documentation shall fully describe the exterior wall system, which was tested, where applicable, as well as the test procedure used. | Submit plans with sufficient detail for compliance to be determined. |
| 5. | 106.1.3 (5) Information on the Construction Documents (Sections) | The construction documents submitted lack sufficient detail indicating a clear method of assembly. 106.1.3 (5) Information on the Construction Documents (Sections): Cross sections, wall sections, details including typical connections as required to fully describe the residential building construction showing wall, ceiling, floor and roof materials. Residential construction documents shall describe the exterior wall envelope in sufficient detail to determine compliance with this code. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 6. | 106.1.3 (6) Information on the Construction Documents (Structure) | The construction documents submitted lack a complete structural description. 106.1.3 (6) Information on the Construction Documents (Structure) Complete structural description of the residential building including size and location of all structural elements used in the design of the residential building and other data as required to fully describe the structural system. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 7. | 106.1.3 (8) Systems description | The construction documents submitted lack a complete description of plumbing and electrical systems. 106.1.3 (8) Systems description: Description of the mechanical, plumbing and electrical systems, including: materials; location and type of fixtures and equipment; materials, and sizes of all ductwork; location and type of heating, ventilation, air conditioning and other mechanical equipment; and all lighting and power equipment. | Submit plans with sufficient detail for compliance to be determined. |

The owner shall bring items listed into compliance with the rest of the code within thirty (30) calendar days.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order to the local Board of Building Standards and Appeals, pursuant to and upon compliance with the 2013 Residential Code of Ohio, Section 110.1 (Hearing and right of appeal, local board of building appeals) & Section 1315.07, Elyria Codified Ordinance. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 20 days after the day the decision, notice, or order was served, an application for Appeals is attached for your convenience. Failure to comply with this Notice of Violation with an Adjudication Order within the stated compliance date(s) may result in the issuance of a summons without further notice and may require a court appearance.

Residential Building Official: 
 Ray Langdon, Cert# 4800

Enclosures: Local Board of Appeals application.
 Residential Construction review checklist.

Owner: Jan Kleinburg, Trustee, 239 Brandtson Ave. Elyria, OH. 44035
 Certified Mail # 9171-9690-0935-0166-3963-10.
 Authorized Representative /Contractor: JDS Construction, Attn: Jewel Domingo. 352 Lowell St. Elyria, OH. 44035
 Certified Mail # 9171-9690-0935-0166-3963-27.

XC: Ralph Cantu, Building Official
 File.

239 BRANDSTON RCO COMPLIANCE CHECK LIST

REVIEWED BY: **RAY LANGDON**

DATE: **12/5/2017**

| | RCO SECTION | | NOT INDICATED |
|-----------------|--|--------------------------|---------------|
| 301 | Design Criteria | | X |
| 301.5 | Live Loads/ Dead Loads | | X |
| 301.2.3, 301.6 | Snow Loads | | X |
| 302.4.1.2 | Penetration firestop system | | X |
| 302.5.1 | Opening protection | | N/A |
| 303.1 | Light and Ventilation | X | |
| 308.4 | Hazardous Glazing | | X |
| 302.6 | Attached Garage Fire Separation | | N/A |
| 310.1 | Bedroom Emergency Egress | | N/A |
| 311 | Means of Egress | | X |
| 311.5 | Stairways Riser/Run Headroom | | X |
| 311.5.6 | Handrails | | X |
| 312.1 | Guards | | X |
| 314, 315 | Smoke and C/O Detectors | | X |
| 316 | Foam Plastic Separation | | X |
| 317 | Protection of wood/ decay | | X |
| 401.4.1 | Soil Bearing Capacity (If none shown, use 1500 psf) | | X |
| 402.2 Tbl 402.2 | Concrete | | X |
| 403 | Footing & Pier Pad Size and Location | INSUFFICIENT INFORMATION | |
| 403.1.6 | Foundation Anchor Bolts | | X |
| 404 | Foundation Wall Sizes and Reinforcement | X | |
| 405/406 | Foundation Drainage & Dampproofing or Waterproofing | | X |
| 408 | Crawlspace Ventilation | | X |

| | | | | | |
|-------------|---|-----------------------------------|-----------------------------|---|-----|
| 408.4 | Crawlspace Access | | | X | |
| 501.2 | Bearing for all Structural Loads | INSUFFICIENT INFORMATION | | | |
| 502.3 | First Floor Joists | INSUFFICIENT INFORMATION/ SPACING | | | |
| 502.3 | Second Floor Joists | | | | N/A |
| 502.5 | Tables a & b; Beams & Headers In Crawlspace & Basement | | | X | |
| 506 | Concrete floors on ground | | | | N/A |
| 403.1.1 | Table b; Basement or Crawlspace Columns & Piers | INSUFFICIENT INFORMATION | | | |
| 601 | 1st Floor Walls | | | | |
| 601 | 2nd Floor Walls | | | | |
| 502.5(1)(2) | 1st Floor Headers & Beams | X | | | |
| 502.5(1)(2) | 2nd Floor Headers & Beams | | | | N/A |
| 602.8 | Fire Stopping | | | X | |
| 602.10 | Wall Bracing | | | X | |
| 703.7 | Stone & Brick Veneer | | | | N/A |
| 802.2 | Roof Beams, Hips, Valleys, Ridges showing sizing | | | | N/A |
| 802.3.1 | Rafter Ties, Joists not perpendicular to Rafters | | | | N/A |
| 802.4 | Ceiling Joist Spans | | | | N/A |
| 802.5 | Roof Rafter Spans | | | | N/A |
| 802.5.1 | Roof Purlins | | | | N/A |
| 802.10 | Trusses - | | X TRUSS SPECS NOT SUBMITTED | | |
| 803.2 | Roof Sheathing Thickness/Clips | | X CLIPS | | |
| 806/807.1 | Attic Ventilation and/or Attic Access | INSUFFICIENT INFORMATION | | | |
| 1001 | Masonry Chimneys | | | | N/A |
| 1003 | Masonry Fireplaces | | | | N/A |
| 1004 | Pre-Fab Fireplaces Install per Manufacturer's Specifications | | | | N/A |

| | | | | | |
|------------|--|--------------------------|--|--|--|
| | | | | | |
| Chapter 11 | 2013 RCO / IECC 2009 | INSUFFICIENT INFORMATION | | | |
| COMMENTS: | <p>REQUIRED SITE PLAN NOT SUBMITTED R-22 INSULATION PROPOSED FOR ADDITION CEILING DOES NOT COMPLY WITH RCO CHAPTER 11 SECTION: 1102.2.1\ R-38 IS REQUIRED.</p> | | | | |



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department

131 Court St. Suite 101

Elyria, OH 44035

(Plan Review)

Adjudication Order No. R2017-001 R.L.

Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: December 5, 2017
Owner: Jan Kleinburg, Trustee
239 Brandtson Ave.
Elyria, OH. 44035

Contractor: JSD Construction
352 Lowell St.
Elyria, OH. 44035

Project: 239 Brandtson Ave. Elyria, OH 44035
(10' X 20' addition)

In response to an Application for Plan Approval, received 12/01/17, the plans have been reviewed to determine compliance with the 2013 Residential Code of Ohio. Based on our review, we must deny your request to approve the plans as submitted. We have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | RCD Section | Issue of Non-Compliance | Action required |
|--------|---|--|--|
| 1. | 106.1.3 (Information on the Construction Documents) | The construction documents submitted lack required information: 106.1.3 Information on the Construction Documents: Residential construction documents shall be dimensioned and drawn upon suitable material. Electronic media documents are permitted to be submitted when approved by the residential building official. Construction documents shall be coordinated and of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this code. Construction documents, adequate for the scope of the project, shall include information necessary to determine compliance with this code. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 2. | 106.1.3 (2) Information on the Construction Documents (Site Plan) | Required site plan was not submitted: 106.1.3 (2) Site Plan: A site plan showing a north orientation arrow, the size and location of new residential construction and all existing structures on the site, all property and interior lot line locations with setback and side yard dimensions and distances from buildings to lot lines, the locations of the nearest streets, the established street grades, the locations, types and sizes of all utility lines, the location of any fences, and the elevations of all proposed finished grades; and it shall be drawn in accordance with an accurate boundary line survey. In the case of demolition, the site plan shall show construction to be demolished and the location and size of existing structures and construction that are to remain on the site or plot. The residential building official is authorized to waive or modify the requirement for a site plan when the application for approval is for alteration or repair or when otherwise warranted. | Submit dimensioned site plan with sufficient detail for compliance to be determined. |
| 3. | 106.1.3 (3) Information on the Construction Documents (floor plan) | The construction documents submitted lack detailed floor the required floor plan. 106.1.3 (3) Floor Plans: Complete floor plans, including plans of full or partial basements and full or partial attics. Floor plans must show all relevant information such as door swings, stairs and ramps, windows, shafts, all portions of the means of egress, etc., and shall be sufficiently dimensioned to describe all relevant space sizes. Wall materials shall be described by cross-hatching (with explanatory key), by notation, or by other clearly understandable method. Spaces must be identified by how each space is intended to be used. | Submit floor plans with sufficient detail for compliance to be determined. |

www.cityofelyria.org

City of Elyria Building Department
 131 Court St. Suite 101
 Elyria, OH 44035
 (Plan Review)
 Adjudication Order No. R2017-008 D.F.
 Residential Code of Ohio, Section 109

Pg. 2 of 2

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|--|---|--|
| 4. | 016.1.3 (4) (Exterior Envelope) | The construction documents submitted lack required detail of the exterior envelope. 016.1.3 (4) Exterior wall Envelope: The exterior envelope shall be described in sufficient detail to determine compliance with this code and the referenced standards. Details or elevations shall be provided which describe floor to floor dimensions, flashing, intersections with dissimilar materials, corners, end details, control joints, intersections at roof, eaves, or parapets, means of drainage, water-resistant membrane, details around openings, location and type of vapor retarders, window and door "U"-values, and insulation location and "R"-values. The supporting documentation shall fully describe the exterior wall system, which was tested, where applicable, as well as the test procedure used. | Submit plans with sufficient detail for compliance to be determined. |
| 5. | 106.1.3 (5) Information on the Construction Documents (Sections) | The construction documents submitted lack sufficient detail indicating a clear method of assembly. 106.1.3 (5) Information on the Construction Documents (Sections): Cross sections, wall sections, details including typical connections as required to fully describe the residential building construction showing wall, ceiling, floor and roof materials. Residential construction documents shall describe the exterior wall envelope in sufficient detail to determine compliance with this code. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 6. | 106.1.3 (6) Information on the Construction Documents (Structure) | The construction documents submitted lack a complete structural description. 106.1.3 (6) Information on the Construction Documents (Structure): Complete structural description of the residential building including size and location of all structural elements used in the design of the residential building and other data as required to fully describe the structural system. | Submit dimensioned plans with sufficient detail for compliance to be determined. |
| 7. | 106.1.3 (8) Systems description | The construction documents submitted lack a complete description of plumbing and electrical systems. 106.1.3 (8) Systems description: Description of the mechanical, plumbing and electrical systems, including: materials; location and type of fixtures and equipment; materials, and sizes of all ductwork; location and type of heating, ventilation, air conditioning and other mechanical equipment; and all lighting and power equipment. | Submit plans with sufficient detail for compliance to be determined. |

The owner shall bring items listed into compliance with the rest of the code within thirty (30) calendar days.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order to the local Board of Building Standards and Appeals, pursuant to and upon compliance with the 2013 Residential Code of Ohio, Section 110.1 (Hearing and right of appeal, local board of building appeals) & Section 1315.07, Elyria Codified Ordinance. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 20 days after the day the decision, notice, or order was served, an application for Appeals is attached for your convenience. Failure to comply with this Notice of Violation with an Adjudication Order within the stated compliance date(s) may result in the issuance of a summons without further notice and may require a court appearance.

Residential Building Official: 

Ray Langdon, Cert# 4800

Enclosures: Local Board of Appeals application.

Residential Construction review checklist.

Owner: Jan Kleinburg, Trustee, 239 Brandtson Ave. Elyria, OH. 44035

Certified Mail # 9171-9690-0935-0166-3963-10.

Authorized Representative /Contractor: JDS Construction, Attn: Jewel Domingo. 352 Lowell St. Elyria, OH. 44035

Certified Mail # 9171-9690-0935-0166-3963-27.

XC: Ralph Centu, Building Official
File.

239 BRANDSTON RCO COMPLIANCE CHECK LIST

REVIEWED BY: RAY LANGDON

DATE: 12/5/2017

| | RCO SECTION | | | NOT INDICATED |
|-----------------|--|--------------------------|--|---------------|
| 301 | Design Criteria | | | X |
| 301.5 | Live Loads/ Dead Loads | | | X |
| 301.2.3, 301.6 | Snow Loads | | | X |
| 302.4.1.2 | Penetration firestop system | | | X |
| 302.5.1 | Opening protection | | | N/A |
| 303.1 | Light and Ventilation | X | | |
| 308.4 | Hazardous Glazing | | | X |
| 302.6 | Attached Garage Fire Separation | | | N/A |
| 310.1 | Bedroom Emergency Egress | | | N/A |
| 311 | Means of Egress | | | X |
| 311.5 | Stairways Riser/Run Headroom | | | X |
| 311.5.6 | Handrails | | | X |
| 312.1 | Guards | | | X |
| 314, 315 | Smoke and C/O Detectors | | | X |
| 316 | Foam Plastic Separation | | | X |
| 317 | Protection of wood/ decay | | | X |
| 401.4.1 | Soil Bearing Capacity (If none shown, use 1500 psf) | | | X |
| 402.2 Tbl 402.2 | Concrete | | | X |
| 403 | Footing & Pier Pad Size and Location | INSUFFICIENT INFORMATION | | |
| 403.1.6 | Foundation Anchor Bolts | | | X |
| 404 | Foundation Wall Sizes and Reinforcement | X | | |
| 405/406 | Foundation Drainage & Dampproofing or Waterproofing | | | X |
| 408 | Crawlspace Ventilation | | | X |

| | | | | | |
|-------------|---|-----------------------------------|--|---|-----------------------------|
| 408.4 | Crawlspace Access | | | X | |
| 501.2 | Bearing for all Structural Loads | INSUFFICIENT INFORMATION | | | |
| 502.3 | First Floor Joists | INSUFFICIENT INFORMATION/ SPACING | | | |
| 502.3 | Second Floor Joists | | | | N/A |
| 502.5 | Tables a & b; Beams & Headers In Crawlspace & Basement | | | X | |
| 506 | Concrete floors on ground | | | | N/A |
| 403.1.1 | Table b; Basement or Crawlspace Columns & Piers | INSUFFICIENT INFORMATION | | | |
| 601 | 1st Floor Walls | | | | |
| 601 | 2nd Floor Walls | | | | |
| 502.5(1)(2) | 1st Floor Headers & Beams | X | | | |
| 502.5(1)(2) | 2nd Floor Headers & Beams | | | | N/A |
| 602.8 | Fire Stopping | | | X | |
| 602.10 | Wall Bracing | | | X | |
| 703.7 | Stone & Brick Veneer | | | | N/A |
| 802.2 | Roof Beams, Hips, Valleys, Ridges showing sizing | | | | N/A |
| 802.3.1 | Rafter Ties, Joists not perpendicular to Rafters | | | | N/A |
| 802.4 | Ceiling Joist Spans | | | | N/A |
| 802.5 | Roof Rafter Spans | | | | N/A |
| 802.5.1 | Roof Purlins | | | | N/A |
| 802.10 | Trusses - | | | | X TRUSS SPECS NOT SUBMITTED |
| 803.2 | Roof Sheathing Thickness/Clips | | | | X CLIPS |
| 806/807.1 | Attic Ventilation and/or Attic Access | INSUFFICIENT INFORMATION | | | |
| 1001 | Masonry Chimneys | | | | N/A |
| 1003 | Masonry Fireplaces | | | | N/A |
| 1004 | Pre-Fab Fireplaces Install per Manufacturer's Specifications | | | | N/A |

| | | | | | |
|------------|--|--------------------------|--|--|--|
| | | | | | |
| Chapter 11 | 2013 RCO / IECC 2009 | INSUFFICIENT INFORMATION | | | |
| COMMENTS: | <p>REQUIRED SITE PLAN NOT SUBMITTED R-22 INSULATION PROPOSED FOR ADDITION CEILING DOES NOT COMPLY WITH RCO CHAPTER 11 SECTION: 1102.2.1\ R-38 IS REQUIRED.</p> | | | | |



City of Elyria

Building Department

Elyria City Hall
 131 Court Street, Suite 101
 Elyria, OH 44035

Phone | 440.326.1491
 Fax | 440.326.1488
 TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035
Stop work
Adjudication Order
Residential Code of Ohio, Section 109
 Pg. 1 of 2

Date: June 12, 2017

Stop Work / Adjudication Order No. 2017-002 R.L.

Project: 641 West River Rd. Elyria, OH 44035

Owner/ Owners Authorized Agent:

| | |
|--|---|
| Attn: SHELLE' MATHIS, SUCCESSOR TRUSTEE THE VALERIA HENTCHEY HARRIS TRUST 611 GARFIELD AVE. ELYRIA, OH. 44035 | CLINT HARRIS 319 PARK AVE. ELYRIA, OH. 44035 |
| KIM HARRIS 2410 WEST 32 ND ST. ELYRIA, OH. 44035 | PAULETTE BARNES 57 YORKTOWN LN. ELYRIA, OH. 44035 |

A site visit was made to your property at 641 West River Rd. on 12/06/2017 and it was noted that work requiring approvals is being conducted,. There have been no applications for approvals submitted to the city's Building Department as of the date of this notice. Pursuant to Section 107 of the RCO 2013 edition all construction work requiring approvals shall stop until such approvals have been issued

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|-------------------------|-------------------------|---|
| 1. | 107: Approvals required | Plan approval required. | Submit detailed plans for approval, obtain a certificate of plan approval. Obtain a license to build. |
| | | | |

LEGAL NOTICE

Date: 12/07/2017

Whereas, violations of Section(s) _____ X _____ Contractor Registration Ord. 62-180
Code section 105,106 & **107 Residential Code of Ohio 2013**
_____ Ohio Building Code 2011
_____ Ohio Mechanical Code
_____ Ohio Plumbing Code
_____ National Electrical Code 2014

Have been found, **IT IS HEREBY ORDERED**, in accordance with the above Code, that all persons cease, desist from, and

STOP WORK

AT ONCE PERTAINING TO DEMOLITION, ALTERATIONS OR REPAIRS ON THESE PREMISES, KNOWN AS

641 West River Rd. Elyria, OH. 44035 / PP# 0624140000004.

All persons acting contrary to this order or removing or mutilating this notice are liable to arrest unless such action is authorized by the Elyria Building Department.

Residential Building Official
Certificate # 4800



City of Elyria

Building Department

Elyria City Hall
 131 Court Street, Suite 101
 Elyria, OH 44035

Phone | 440.326.1491
 Fax | 440.326.1488
 TTY-TDD | 440.326.1548

**City of Elyria Building Department
 131 Court St. Suite 101
 Elyria, OH 44035
 Stop work
 Adjudication Order
 Residential Code of Ohio, Section 109**

Pg. 1 of 2

Date: December 11, 2017

Stop Work / Adjudication Order No. 2017-005 R.L.

Project: 641 West River Rd. Elyria, OH 44035

Remodel

Owner/ Owners Authorized Agent:

| |
|--|
| Attn: Margret A. Darnell 126 Warden Ave. Elyria, OH. 44035 |
|--|

A site visit was made to your property at 641 West River Rd. on 12/06/2017 and it was noted that work requiring approvals is being conducted,. There have been no applications for approvals submitted to the city's Building Department as of the date of this notice. Pursuant to Section 107 of the RCO 2013 edition all construction work requiring approvals shall stop until such approvals have been issued

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|-------------------------|-------------------------|---|
| 1. | 107: Approvals required | Plan approval required. | Submit detailed plans for approval, obtain a certificate of plan approval. Obtain a license to build. |
| | | | |


NOTE THIS IS A RE-ISSUE. THE NOTICE ISSUED ON 12/7/17 WAS ISSUED TO THE WRONG OWNER.

Please submit the required application for plan approval including two (2) sets of construction documents for review. The owner shall bring items listed into compliance with the rest of the code within 30 calendar days.

You have the right to appeal this decision, If you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Ray Langdon: 
Residential Building Official, Cert# 4800
440-371-5004
rlanngdon@cityofelyria.org

Encloses: Local Board of Appeals Application.

Certified Mail #'s 9171 9690 0935 0166 3964 19

Xc: Ralph Cantu, Building Official
file



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order
Residential Code of Ohio, Section 109
Pg. 1 of 2

Date: November 9, 2018

Plan Review / Adjudication Order No. R- 2018-001-RL

Project: Covered Porch 609 3rd St. Elyria, OH 44035

Owner/ Owners Authorized Agent:

Attn: TSARDOULIAS KRISTI CARLA CLUTTER
468 AUGUSTA DR ELYRIA,
ELYRIA, OH 44035

In response to your Application for Plan Approval, dated October 9, 2018. I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed Item of non-compliance | Action necessary to correct item |
|--------|----------------------|--|---|
| 1 | RCO Section: 106 | Plans submitted lack sufficient information for review to determine code compliance. Plans indicate support post that will rest at grade level and will be subject to frost uplift | Please revise and resubmit <u>2</u> sets of corrected plans for review including site plan. |
| 2 | RCO Section: 106.1.3 | Documents submitted lack the required site plan | Please site plan. |

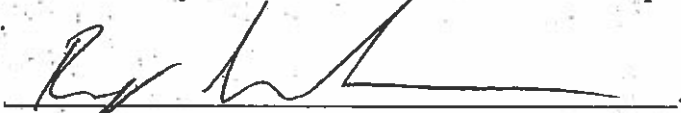
Please revise and resubmit 2 sets of corrected plans to our office.

The owner shall bring items listed into compliance with the rest of the code within **30** calendar days.

You have the right to appeal this decision, If you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800
Phone: 440-326-1478
Email: rlangdon@cityofelyria.org

Xc: Building Official
File

9171 9690 0935 0204 5024 13



City of Elyria

Building Department

Elyria City Hall
 131 Court Street, Suite 101
 Elyria, OH 44035

Phone | 440.326.1491
 Fax | 440.326.1488
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City of Elyria Building Department
 131 Court St. Suite 101
 Elyria, OH 44035

Adjudication Order No. R 2018-002 R.L.
Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: December 7, 2018

To: JANE L CARLSON
 RAC PROPERTIES LLC
 12059 ROBSON RD
 GRAFTON, OH 44044

Plan Approval Required / Adjudication Order No: R 2018-002 R.L.

Project: 927 East River St. Elyria, OH 44035
 (New front porch framing and deck)

On 12/06/18, it was discovered that work on the home for the site mentioned, was well underway prior to the issuance of approval or determining compliance with the 2013 Residential Code of Ohio. Based on the site visit, I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|-------------------------------|---|--|
| 1. | 105.1 (Approvals required) | New porch deck currently underway on the structure prior to approvals or permit issuance. | Apply for or have an authorized (Registered) agent apply for the work completed. <i>Note:</i> 1317.07 PENALTY FEE. If any work for which a permit is required by law is commenced without such a permit by any person who had knowledge, or should have had knowledge, that the work required a permit, then the fees required by the permit shall be doubled, but the payment of such double fee shall not relieve any person from fully complying with the requirements or regulations governing building, plumbing, wiring, heating and cooling in the City. (Ord. 97-275. Passed 11-3-97.) |

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order No. R2018-112 R.L.
Residential Code of Ohio, Section 109

Pg. 2 of 2

Please submit an application for plan approval with detailed drawings meeting the requirements of the 2013 RCO, Section 106 (copy attached) for review to our office. (It will help us to expedite the review of your resubmittal if you identify the changes you have made by 'clouding' the revisions or otherwise indicating how you have resolved the items of non-compliance, if applicable). The owner shall bring items listed into compliance with the code sections listed, within thirty (30) calendar days of the mailing of the order, comply with the order, or otherwise be released from the order by the Residential Building Official.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order to the local Board of Building Standards and Appeals, pursuant to and upon compliance with the 2013 RCO, Section 110. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. Unlawful continuance or failure to cease work after receipt of an order is hereby declared a public nuisance as specified in section 109.3.1 of the 2013 RCO.

Residential Building Official: 
Ray Langdon, Cert# 4800

440-326-1478 or rlangdon@cityofelyria.org

Certified mail #

9171 9690 0935 0204 5025 74

XC: Building Official
File.

LEGAL NOTICE

Date: 12/07/18

Whereas, violations of Section(s)

105 & 109

Contractor Registration Ord. 62-180
Residential Code of Ohio 2013
Ohio Building Code 2011
Ohio Mechanical Code
Ohio Plumbing Code
National Electrical Code 2014

Have been found, **IT IS HEREBY ORDERED**, in accordance with the above Code, that all persons cease, desist from, and

STOP WORK

at once pertaining to demolition, alterations or repairs on these premises, known as

927 East River St. Elyria, OH 44035

PP#0625095000006

All persons acting contrary to this order or removing or mutilating this notice are liable to arrest unless such action is authorized by the Elyria Building Department.



Residential Building Official #4800



City of Elyria

Building Department

Elyria City Hall
 131 Court Street, Suite 101
 Elyria, OH 44035

Phone | 440.326.1491
 Fax | 440.326.1488
 TTY-TDD | 440.326.1548

City of Elyria Building Department
 131 Court St. Suite 101
 Elyria, OH 44035

Adjudication Order No. R 2018-003 R.L.
 Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: December 7, 2018

To: JANE L CARLSON
 RAC PROPERTIES LLC
 12059 ROBSON RD
 GRAFTON, OH 44044

Plan Approval Required / Adjudication Order No: R 2018-003 R.L.

Project: 1115 East River St. Elyria, OH 44035
 (New porch deck at the front and side of the house)

On 12/06/18, I discovered that work on the home for the site mentioned, was well underway prior to the Issuance of approval or determining compliance with the 2013 Residential Code of Ohio. Based on the site visit, I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|-------------------------------|---|---|
| 1. | 105.1 (Approvals required) | New porch deck currently underway on the structure prior to approvals or permit issuance. | Apply for or have an authorized (Registered) agent apply for the work completed. <i>Note: 1317.07 PENALTY FEE.</i> If any work for which a permit is required by law is commenced without such a permit by any person who had knowledge, or should have had knowledge, that the work required a permit, then the fees required by the permit shall be doubled, but the payment of such double fee shall not relieve any person from fully complying with the requirements or regulations governing building, plumbing, wiring, heating and cooling in the City. (Ord. 97-275. Passed 11-3-97.) |

City of Elyria Building Department

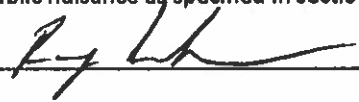
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order No. R2018-112 R.L.
Residential Code of Ohio, Section 109

Pg. 2 of 2

Please submit an application for plan approval with detailed drawings meeting the requirements of the 2013 RCO, Section 106 (copy attached) for review to our office. (It will help us to expedite the review of your resubmittal if you identify the changes you have made by 'clouding' the revisions or otherwise indicating how you have resolved the items of non-compliance, if applicable). The owner shall bring items listed into compliance with the code sections listed, within thirty (30) calendar days of the mailing of the order, comply with the order, or otherwise be released from the order by the Residential Building Official.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order to the local Board of Building Standards and Appeals, pursuant to and upon compliance with the 2013 RCO, Section 110. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. Unlawful continuance or failure to cease work after receipt of an order is hereby declared a public nuisance as specified in section 109.3.1 of the 2013 RCO.

Residential Building Official: 
Ray Langdon, Cert# 4800

440-326-1478 or rlangdon@cityofelyria.org

Certified mail # 9171 9690 0935 0204 5025 81

XC: Building Official
File.

LEGAL NOTICE

Date: 12/07/18

Whereas, violations of Section(s)

105 & 109

Contractor Registration Ord. 62-180
Residential Code of Ohio 2013
Ohio Building Code 2011
Ohio Mechanical Code
Ohio Plumbing Code
National Electrical Code 2014

Have been found, **IT IS HEREBY ORDERED**, in accordance with the above Code, that all persons cease, desist from, and

STOP WORK

at once pertaining to demolition, alterations or repairs on these premises, known as

1115 East River St. Elyria, OH 44035

PP#0625086101012


All persons acting contrary to this order or removing or mutilating this notice are liable to arrest unless such action is authorized by the Elyria Building Department.



Residential Building Official

AFFIDAVIT


I Ray Langdon, Residential Building Official certificate # 4800, posted stop work placard with an Adjudication order # R 2018-003- R.L. dated December 7, 2018 at 1115 East River St. Elyria, Oh. 44035.


Signature

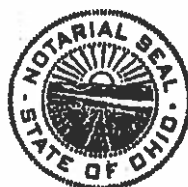
Residential Building Official cert# 4800
Title

Before me, a Notary Public in and for Said State and County, personally appeared the aforementioned Ray Langdon who acknowledged that he/she did sign the foregoing instrument and that the same is his/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my notarial seal at Elyria, Ohio, this 7th day of December, 2018.


Notary Public

Rev. 1/08



MARY L. TOMSKI
Notary Public
In and for the State of Ohio
My Commission Expires
January 6, 2023



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order
Residential Code of Ohio, Section 109
Pg. 1 of 2

Date: November 20, 2018

Plan Review / Adjudication Order No. R-2018-002-RL

Project: Interior remodel 334 Princeton Ave. Elyria, OH 44035

Owner/ Owners Authorized Agent:

Attn: Michael & Glenda Johnson
321 W. 31st St.
Lorain, OH 44055

In response to your Application for Plan Approval, dated November 13th, 2018. I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed item of non-compliance | Action necessary to correct item |
|--------|------------------|--|--|
| 1 | RCO Section: 106 | Plans submitted lack sufficient information for review to determine code compliance. | Please revise and resubmit 2 sets of plans for review. Include detailed construction drawings describing the materials and method of assembly of the proposed new footer and foundation wall. Provide a floor plan and energy efficiency details (insulation). |

- **Note: Separate permits may be required for plumbing and electrical.**

Please revise and resubmit 2 sets of corrected plans to our office.

The owner shall bring items listed into compliance with the rest of the code within 30 calendar days.

You have the right to appeal this decision, If you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800

9171 9690 0935 0204 5024 51

cc: 10540 Rissia Rd. Oberlin OH. 44074
Building Official
File

9171 9690 0935 0204 5024 44



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order Residential Code of Ohio, Section 109

Pg. 1 of 1

Date: August 14, 2018
Plan Review / Adjudication Order No. 2018-0260-RL
Project: 206 Boston Ave. Elyria, OH 44035
Owner/ Owners Authorized Agent:

Attn: Garner Kimberly M & Smith Justin E
260 Boston Ave
Elyria, OH. 44035

In response to your Application for Plan Approval, dated July 25th, 2018, I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed item of non-compliance | Action necessary to correct item |
|--------|---------------|---|---|
| 1 | RCO 106.1.3 | Plans submitted lack the required site plan for review. | Resubmit <u>2</u> sets of corrected plans that include the required site plan. |
| 2 | RCO 106.1 | Construction documents submitted lack sufficient information to determine code compliance. I.e. <i>Footing details, details for the connection to the main structure, indicating compliance with RCO Section: 502.2.2.1</i> | Resubmit <u>2</u> sets of corrected plans indicating compliance with the 2013 RCO |

Please revise and resubmit 2 sets of corrected plans to our office.
The owner shall bring items listed into compliance with the rest of the code within **30** calendar days.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800

9171 9690 0935 0202 7578 91

Xc: Ralph Cantu, Building Official
(440) 326-1473

www.cityofelyria.org



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order
Residential Code of Ohio, Section 109
Pg. 1 of 2

Date: November 9, 2018

Plan Review / Adjudication Order No. R- 2018-001-RL

Project: Covered Porch 609 3rd St. Elyria, OH 44035

Owner/ Owners Authorized Agent:

Attn: TSARDOULIAS KRISTI CARLA CLUTTER
468 AUGUSTA DR ELYRIA,
ELYRIA, OH 44035

In response to your Application for Plan Approval, dated October 9, 2018. I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed Item of non-compliance | Action necessary to correct item |
|--------|---------------------|--|---|
| 1 | RCO Section: 106 | Plans submitted lack sufficient information for review to determine code compliance. Plans indicate support post that will rest at grade level and will be subject to frost uplift | Please revise and resubmit <u>2</u> sets of corrected plans for review including site plan. |
| 2 | RCO Section:106.1.3 | Documents submitted lack the required site plan | Please site plan. |

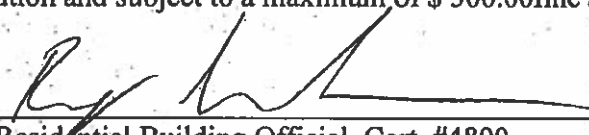
Please revise and resubmit 2 sets of corrected plans to our office.

The owner shall bring items listed into compliance with the rest of the code within **30** calendar days.

You have the right to appeal this decision, If you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800
Phone: 440-326-1478
Email: rlangdon@cityofelyria.org

Xc: Building Official
File

9171 9690 0935 0204 5024 13

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order
Residential Code of Ohio, Section 109
Pg. 1 of 2

Date: January 9, 2019

Plan Review / Adjudication Order No. R-2019-001-RL

Project: Porch deck at 1115 East River. Elyria, OH 44035

Owner/ Owners Authorized Agent:

Attn: RAC PROPERTIES LLC / JAYNE CARLSON, AGENT
12059 ROBSON RD
GRAFTON, OH 44044

In response to your Application for Plan Approval, dated January 03-2019. I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed Item of non-compliance | Action necessary to correct item |
|--------|---------------|--|--|
| 2 | RCO 106.1 | Construction documents submitted lack sufficient information to determine code compliance. | Resubmit <u>2</u> sets of corrected plans indicating compliance with the 2013 RCO. |

- See attached checklist indicating deficiencies

Please revise and resubmit 2 sets of corrected plans to our office.

The owner shall bring items listed into compliance with the rest of the code within 30 calendar days.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

9171 9690 0935 0202 7400 53

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800

Cc: MENDCO CONSTRUCTION CO INC 41345 SCHADDEN RD ELYRIA OH 44035

9171 9690 0935 0202 7400 60

MENDCO AGENT, PATRICK J. WENDLING 37701 BUTTERNUT RIDGE RD ELYRIA OH 44035

9171 9690 0935 0202 7400 77

RESIDENT 1115 EAST RIVER RD. ELYRIA, OH. 44035

9171 9690 0935 0202 7400 46

RCO COMPLIANCE CHECK LIST

REVIEWED BY: RAY LANGDON

DATE: 1/9/2019

| DECKS | RCO SECTION | | NOT INDICATED | DOES NOT APPLY |
|-------------|---|---|---------------|----------------|
| 311.3.1 | FLOOR ELIVATION AT REQUIRED EGRESS DOOR | | X | |
| 311.3.2 | FLOOR ELIVATION FOR OTHER EXTERIOR DOORS | | X | |
| 311.7.1 | STAIRWAYS / WIDTH | | | X |
| 311.7.4.1 | RISER HEIGHT | | | X |
| 311.7.4.2 | TREAD DEPTH | | | X |
| 311.8.1 | MAXIMUM SLOPE- RAMPS | | | X |
| 311.8.2 | LANDING REQUIRED- RAMPS | | | X |
| 311.8.3 | HANDRAILS REQUIRED- RAMPS | | | X |
| 311.8.3.1 | HEIGHT- RAMPS | | | X |
| 311.8.3.2 | GRIP SIZE- RAMPS | | | X |
| 311.8.3.3 | CONTINUITY- RAMPS | | | X |
| 312.1 | GUARDS/ WHERE REQUIRED | | | X |
| 312.2 | HEIGHT | | | X |
| 312.3 | OPENING LIMITATIONS | | | X |
| 312.4 | EXTERIOR WOOD PLASTIC COMPOSITE GUARDS | | | X |
| 317 | PROTECTION OF WOOD AND WOOD BASED PRODUCTS AGAINST DECAY | | X | |
| 317.3.1 | FASTENERS FOR PRESERVATIVE WOOD | | X | |
| 403.1.4 | MINIMUM DEPTH | | | X |
| 403.1.4.1 | FROST PROTECTION | | | X |
| 403.5 | EXTERIOR DECK FOOTINGS | | | X |
| TBL 403.5 | MINIMUM FOOTING SIZE FOR DECK FOOTING WITH OUT ROOF LOADS | | | X |
| 407.3 | STRUCTURAL REQUIREMENTS | | | X |
| 502.2.2 | DECKS | X | X | |
| 502.2.2.1 | DECK LEDGER CONNECTION TO BAND JOIST | | X | |
| 502.2.2.1.1 | PLACEMENT OF LAG SCREWS OR BOLTS IN DECK LEDGERS | | X | |
| 502.2.2.2 | ALTERNATE DECK LEDGER CONNECTIONS | | X | |

| | | | | | |
|----------------|--|---|---|---|---|
| 502.2.2.4 | EXTERIOR WOOD / PLASTIC COMPOSITE DECK BOARDS | X | | | |
| 502.3 | ALLOWABLE JOIST SPANS | | X | | |
| 502.3.3 | CANTILEVER | | | | X |
| 502.3.3(2) TBL | CANTILEVER SPANS | | | | X |
| 502.5(2) TBL | HEADERS AND GIRDERS | | X | | |
| 502.6 | BEARING | X | | | |
| 502.6.2 | JOIST FRAMING | | X | | |
| 502.9 | FASTENING | | | X | |
| 308.4 | GLAZING / HAZARDOUS LOCATIONS | | | | X |
| 310.5 | EMERGENCY ESCAPE WINDOWS UNDER DECKS AND PORCHES | | | | X |
| COMMENTS: | MORE INFORMATION NEEDED | | | | |

ELYRIA BUILDING DEPARTMENT

*131 Court Street
Elyria, Ohio 44035
440-326-1491*

Construction work which requires a permit has been started at 1115 EAST AVE.
If a building permit has been acquired the permit must be posted in a conspicuous location for public view,
preferably in a front window. No permit was visible on 12-6-18.

If no permit has been issued, you must acquire one immediately. Work at the site may not proceed until the permit has been secured or approval to proceed is granted by the Chief Building Official. 1317.07 Elyria Codified Ordinances states: "PENALTY FEE: If any work for which a permit is required by law is commenced without such a permit by any person who had knowledge, or should have had knowledge, such double fee shall not relieve any person from fully complying with the requirements or regulations governing building, plumbing, wiring, heating and cooling in the City."

Thank you for your cooperation in this matter.

Inspector R. LA



City of Elyria

Building Department

Elyria City Hall
131 Court Street, Suite 101
Elyria, OH 44035

Phone | 440.326.1491
Fax | 440.326.1488
TTY-TDD | 440.326.1548

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order

Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: January 28, 2019

Plan Review / Adjudication Order No. R-2019-005-RL

Project: Porch deck at 1115 East River. Elyria, OH 44035

Owner/ Owners Authorized Agent:

Attn: RAC PROPERTIES LLC / JAYNE CARLSON, AGENT

12059 ROBSON RD
GRAFTON, OH 44044

9171 9690 0935 0202 7408 86

In response to your Application for Plan Approval, dated January 03-2019. I have reviewed the plans to determine compliance with the 2013 RCO. Based on the review, I must deny your request to approve the plans as submitted. I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | Code Citation | Observed Item of non-compliance | Action necessary to correct item |
|--------|---------------|--|--|
| 2 | RCO 106.1 | Construction documents submitted lack sufficient information to determine code compliance. | Resubmit <u>2</u> sets of corrected plans indicating compliance with the 2013 RCO. |

- See attached checklist indicating deficiencies. , NOTE COLUMNS “*DOES NOT COMPLY*” AND “*NOT INDICATED*” FOR CORRECTIONS AND OR MORE INFORMATION NEEDED FOR REVIEW.

Please revise and resubmit 2 sets of corrected plans to our office.

The owner shall bring items listed into compliance with the rest of the code within 30 calendar days.

You have the right to appeal this decision, if you choose to appeal; this letter is to be used as an adjudication order pursuant to RCO, Section 109. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. In order to appeal, you must request within 30 days of the mailing of this notice to: the Ohio Board of Building Appeals,

P.O. Box 4009.
6606 Tussing Road.
Reynoldsburg, OH 44068-9009
Phone (614) 644-2616

www.cityofelyria.org

If the appeal is waived, failure by the owner to respond to the order to comply per the RCO Section 109.2 could result in prosecution and subject to a maximum of \$ 500.00 fine as provided for in section 3791.04 of the Ohio Revised Code.

Reviewed by: 
Ray Langdon, Residential Building Official, Cert #4800

Cc: MENDCO CONSTRUCTION CO INC 41345 SCHADDEN RD ELYRIA OH 44035
9171 9690 0935 0202 7408 62
MENDCO AGENT, PATRICK J. WENDLING 37701 BUTTERNUT RIDGE RD ELYRIA OH 44035
9171 9690 0935 0202 7408 79
RESIDENT 1115 EAST RIVER RD. ELYRIA, OH. 44035

RCO COMPLIANCE CHECK LIST

REVIEWED BY: Ray Langdon

DATE: 1.28.19

| DECKS | RCO SECTION | COMPLIANT | NON-COMPLIANT | NOT INDICATED | DOES NOT APPLY |
|-------------|---|-----------|---|---------------|----------------|
| 311.3.1 | FLOOR ELIVATION AT REQUIRED EGRESS DOOR | | | X | |
| 311.3.2 | FLOOR ELIVATION FOR OTHER EXTERIOR DOORS | | | | X |
| 311.7.1 | STAIRWAYS / WIDTH | | | X | |
| 311.7.4.1 | RISER HEIGHT | | | X | |
| 311.7.4.2 | TREAD DEPTH | | | X | |
| 311.8.1 | MAXIMUM SLOPE- RAMPS | | | | X |
| 311.8.2 | LANDING REQUIRED- RAMPS | | | | X |
| 311.8.3 | HANDRAILS REQUIRED- RAMPS | | | | X |
| 311.8.3.1 | HEIGHT- RAMPS | | | | X |
| 311.8.3.2 | GRIP SIZE- RAMPS | | | | X |
| 311.8.3.3 | CONTINUITY- RAMPS | | | | X |
| 312.1 | GUARDS/ WHERE REQUIRED | | | | X |
| 312.2 | HEIGHT | | | | X |
| 312.3 | OPENING LIMITATIONS | | | | X |
| 312.4 | EXTERIOR WOOD PLASTIC COMPOSITE GUARDS | | | | X |
| 317 | PROTECTION OF WOOD AND WOOD BASED PRODUCTS AGAINST DECAY | | PROJECT COMPLETED PRIOR TO APPROVALS SPF LUMBER USED. | X | |
| 317.3.1 | FASTENERS FOR PRESERVATIVE WOOD | | | X | |
| 403.1.4 | MINIMUM DEPTH | | | | X |
| 403.1.4.1 | FROST PROTECTION | | | | X |
| 403.5 | EXTERIOR DECK FOOTINGS | | | | X |
| TBL 403.5 | MINIMUM FOOTING SIZE FOR DECK FOOTING WITH OUT ROOF LOADS | | | | X |
| 407.3 | STRUCTURAL REQUIREMENTS | | | | X |
| 502.2.2 | DECKS | X | | X | |
| 502.2.2.1 | DECK LEDGER CONNECTION TO BAND JOIST | | | X | |
| 502.2.2.1.1 | PLACEMENT OF LAG SCREWS OR BOLTS IN DECK LEDGERS | | | X | |
| 502.2.2.2 | ALTERNATE DECK LEDGER CONNECTIONS | | | X | |

| | | | | | |
|----------------|--|---|---|---|---|
| 502.2.2.4 | EXTERIOR WOOD / PLASTIC COMPOSITE DECK BOARDS | | | X | |
| 502.3 | ALLOWABLE JOIST SPANS | X | | | |
| 502.3.3 | CANTILEVER | | | | X |
| 502.3.3(2) TBL | CANTILEVER SPANS | | | | X |
| 502.5(2) TBL | HEADERS AND GIRDERS | | X | | |
| 502.6 | BEARING | | | X | |
| 502.6.2 | JOIST FRAMING | | | X | |
| 502.9 | FASTENING | | | X | |
| 308.4 | GLAZING / HAZARDOUS LOCATIONS | | | | X |
| 310.5 | EMERGENCY ESCAPE WINDOWS UNDER DECKS AND PORCHES | | | | X |
| COMMENTS: | | | | | |

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Adjudication Order No. R 2018-02 D.F.
Residential Code of Ohio, Section 109

Pg. 1 of 2

Date: August 12, 2022

To: RICE JAMES & DONNA
902 Woodland Dr. Elyria, OH. 44035

Plan Approval Required / Adjudication Order No: R 2022-01 R.L.

Project: 902 Woodland Dr. Elyria, OH. 44035
(Front porch prior to required approvals.)

During a miscellaneous visit on 5/8/18, I discovered that work on the home for the site mentioned, was well underway prior to the issuance of approval or determining compliance with the 2019 Residential Code of Ohio. Based on the site visit, I have found the following items do not conform to the requirements of the rules adopted by the Ohio Board of Building Standards pursuant to Chapters 3781 and 3791 of the Ohio Revised Code.

| Item # | RCO Section | Issue of Non-Compliance | Action required |
|--------|---|---|---|
| 1. | 105.1 (Approvals required) | Front porch rebuild prior to approvals. | Apply for or have an authorized (Registered) agent apply for the work completed. Note: Compliance with the Elyria Codified Ordinance Section 1321.07 must be confirmed prior to issuance. (Registration) |
| 2. | 109.1(2) (2.1) (Orders, Violations, & Unsafe Buildings) | Per the site visit, the project (front porch) appears to have been started prior to required approvals. | All actions must Cease and Desist immediately, until the items indicated have approvals issued and the site is inspected for code compliance. |

Pg. 1 of 2

City of Elyria Building Department
131 Court St. Suite 101
Elyria, OH 44035

Pg. 2 of 2

Please submit an application for plan approval with detailed drawings meeting the requirements of the 2019 RCO, Section 106 (copy attached) for review to our office. The owner shall bring items listed into compliance with the code sections listed, within thirty (30) calendar days of the mailing of the order, comply with the order, or otherwise be released from the order by the Residential Building Official.

You have the right to appeal this decision, If you choose to appeal; this letter is to be used as an adjudication order to the local Board of Building Standards and Appeals, pursuant to and upon compliance with the 2019 RCO, Section 110. Please notify our office of your appeals board request. You have the right to be represented by counsel, present arguments, or contentions orally or in writing and present evidence and examine witness appearing for or against you. Unlawful continuance or failure to cease work after receipt of an order is hereby declared a public nuisance as specified in section 109.3.1 of the 2019 RCO.

Residential Building Official:
Ray Langdon, Cert# 4800



440-326-1478.or rlangdon@cityofelyria.org

Enclosures: Permit Application, Section 106, Local Board of Appeals application & Permit Required Flyer.

Certified Mail # 9171969009350235

XC: Darryl Farkas, Building Official
File.

LEGAL NOTICE

Date: 8 / 12 / 22

Whereas, violations of Section(s)

105 & 109

Contractor Registration Ord. 62-180
Residential Code of Ohio 2019
Ohio Building Code 2011
Ohio Mechanical Code
Ohio Plumbing Code
National Electrical Code 2014

Have been found, **IT IS HEREBY ORDERED**, in accordance with the above Code, that all persons cease, desist from, and

STOP WORK

at once pertaining to demolition, alterations or repairs on these premises, known as

902 Woodland Dr. Elyria, OH 44035

All persons acting contrary to this order or removing or mutilating this notice are liable to arrest unless such action is authorized by the Elyria Building Department.



Residential Building Official

File Attachments for Item:

P-6 Monaco, Michael - BI Trainee, RBI Trainee

Cert ID: 2073

Current Certifications: None, has held RBI Interim several times over last 10 years without completing requirements.

Staff Notes: No sponsor/supervisor signed paperwork submitted, recommend review of certification history.

Committee Recommendation:

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

MORRIS
Last Name

Michael
First Name

BBS Certification ID

SECTION 1: CHECK TRAINEE CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|---|--|
| <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner |
| <input type="checkbox"/> Plumbing Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector | <input type="checkbox"/> Mechanical Inspector |
| <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | | | |

| | |
|---|---|
| <input type="checkbox"/> Res. Plans Examiner | <input checked="" type="checkbox"/> Res. Building Inspector |
| <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD (Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Section 3: Employment/Education

| a. Formal Education | Date Graduated |
|------------------------------|----------------|
| CHARLES F. BRUSH High School | 1990 |
| | |

Monaco
Last Name

MICHAEL
First Name

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|----------------------------------|
| Beauty Shop, McDONALDS, PHOTOGRAPHERS | F.M. Plumbing & HEATING | Approx 2001 - 2018 |
| INSTALLATIONS & REPAIRS OF FURNACES, FIRE DAMPERS HWT, HUMIDIFIERS, THERMOSTATS, GAS LINES | LIM Services | 2010 - Current |
| STALLOY METALS SEWER WORK, WATER LINES, CEMENT WORK HILL CREST FOODS POURING CEMENT PADS | CEMCO CONSTR. CEMCO | 2004 - |
| NESTRAKER Marriott " YMCA | PANZICA | 1997-98 |
| PANZICA CONSTRUCTION " MAN SELF EMPLOYED MONACO CONSTRUCTION SERVICES | ← RESIDENTIAL CONCRETE WORK, WATER PROOFING → | |
| Total Experience on This Page (In Months): | | |

Last Name

First Name

BBS Certification ID

| | |
|--|-------------------|
| b. Related Vocational or Technical Training | Years' Experience |
| | |
| c. U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| d. Place of Employment: | Years' Employed |
| | |

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

SECTION 5: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|---|
| <i>Example: Children's Hospital, Toledo Structural steel work on addition</i> | <i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i> | <i>July 2013-May 2014 (10 months)</i> |
| Total Experience on This Page (In Months): | | |

Monaco
Last Name

Michael
First Name

BBS Certification ID

SECTION 6: PERSONAL HISTORY

- 1. Have you ever been convicted of any felony, or any crime involving moral turpitude?
If you answered "Yes" please explain below: Yes No
- 2. Have you served in the U.S. armed services? (If No, skip question 3) Yes No
- 3. If YES, were you discharged under honorable conditions? Yes No
If you answered "No" please explain below:

| |
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SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Michael Monaco

Subscribed and duly sworn before me according to law, by the above named applicant this day 1 of NOVEMBER in the year 2022 at _____, County of Cuyahoga and State of OHIO.

Notary Public: Collin Doyle



COLLIN DOYLE
Notary Public
State of Ohio
My Comm. Expires
January 26, 2025

Last Name

First Name

BBS Certification ID

**BUILDING OFFICIAL CERTIFICATION OF
TRAINEE AND SUPERVISOR**

Please complete this certification and return it with the BBS Application for Trainee Certification

Application for participation in a BBS Trainee program is being made to the Board of Building Standards. I, _____, Building Official for the political subdivision of _____ (Municipality, Township, County) do hereby acknowledge that the applicant, _____, and the assigned supervisor, _____ are full-time employees of the above mentioned political subdivision.

Signature: _____

Date: _____

Last Name

First Name

BBS Certification ID

SUPERVISOR CERTIFICATION OF TRAINEE

Please complete this certification and return it with the BBS Application for Trainee Certification.

Application for participation in a BBS trainee program is being made to the Board of Building Standards. I, _____, trainee supervisor for the political subdivision of _____, (Municipality, Township, County) hold certification as a _____, Certification ID# _____, effective until _____, and hereby consent and agree to supervise the work of _____ (Applicant) as a Building Department Trainee pursuant to section 4101:7-3-01(F)(5)(b) of the Ohio Administrative Code.

Number of Trainees presently supervised (including this applicant):

_____ One

_____ Two

Signature: _____ Date: _____

YOU MAY BE
 HELD LIABLE
 FOR NEGLIGENCE
 IF YOU
 SIGN THIS



Last Name

First Name

BBS Certification ID

OPTIONAL ALTERNATIVE TRAINEE PROGRAM PLAN FORM

Building Official, Supervisor and Applicant shall complete and submit this form with BBS Application for Trainee Certification only if Trainee Sponsor is proposing an alternative trainee program in lieu of the requirements of the traditional trainee program specified in OAC 4101:7-3-01(F)(5)(e). No Alternative Trainee Program may propose to waive examination requirements or attendance at the OBCA.

PROPOSED ALTERNATIVE PROGRAM PLAN DESCRIPTION

Attach additional pages if necessary and/or a letter describing the proposed program conditions.

Proposed Alternative Program Length: _____

Proposed Alternative Program Education Requirements: _____

Proposed Alternative Program Training & Supervision Requirements: _____

Explanation of how the Proposed Alternative Program provides equivalent level of training and education based on the Applicant's experience documented in the application: _____

Applicant Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

Building Official Signature: _____

Date: _____

File Attachments for Item:

P-7 Mowry, Michael - ESI, PI

Cert ID: 8793

Current Certifications: MPE, BI, RPE, RBI

Staff Notes: PE. Extensive history designing plumbing and electrical systems: recommend approval.

Committee Recommendation:

Mowry

Michael

8793

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input checked="" type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|-------------------------|
| Architectural Registration | | | |
| P.E. Registration | | E49913 | 1985 |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Plans Examiner Certification | Interim 8793 3/25/22 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Building Inspector Certification | Interim 8973 3/25/22 |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Mowry

Michael

8793

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| Formal Education | Date Graduated |
|---|-------------------|
| BSCE Ohio Northern University | 1979 |
| Rockhurst College | 1984 |
| Related Vocational or Technical Training | Years' Experience |
| Construction worker for seven years during school breaks | 7 |
| | |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| | |
| Place of Employment: | Years' Employed |
| City of Ashland Building and Engineering Department | .5 |
| Owner of Mowry Construction & Engineering, Inc. from 1985 to 2022 | 37 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|---|--|--|
| Ashland Building Department | Interim master plan examiner, residential plan examiner, building inspector, and residential building inspector | Plan examination and periodic building inspection. | 3/25/22 to date |

Mowry

Michael

8793

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a ~~graduate~~ electrical engineer and registered in the State of Ohio. Registration number: E49913 Note: My degree is BSCE but I have been doing electrical design since 1985
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|---|---|
| <p><i>Example:</i> Children's Hospital, Toledo Structural steel work on addition Design and preparation of permit documents and project management and QC inspection for Structural and MEP on multiple projects over a 37 year span.</p> <p>See the attached list of projects and clients of which I was the professional of record in responsible charge of design and field administration over the last thirty-seven years.</p> | <p>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 Mowry Construction & Engineering 2105 Claremont Avenue Ashland, Ohio 44805</p> | <p>July 2013-May 2014 (10 months)</p> <p>See list, December 1985 through 2022</p> |
| Total Experience on This Page (In Months): | | 444 |

Mowry

Last Name

Michael

First Name

8793

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

| |
|--|
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SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Michael D Mowry

Subscribed and duly sworn before me according to law, by the above named applicant this day 5th of October in the year 2022 at Ashland, County of Ashland and State of Ohio.

Notary Public: [Signature]



MICHELLE L. PETERMAN
Notary Public
State of Ohio
My Comm. Expires
September 25, 2024

MOWRY

Construction & Engineering, Inc.



Partial Client and Project List

Industrial and/or Roofing

Notes

Custom Hoists, Inc.

Hayesville, Ohio

(8) Additions and/or Roofing Projects. (over 100,000 Ft² cumulative)

Archway Cookies

Ashland, Ohio

Several additions and/or roofing projects (over 162,000 Ft²)
90,000 SF Expansion in 1990

National Latex Products Co.

Ashland, Ohio

Five additions and miscellaneous projects (approaching 110,000 Ft.² cumulative)

The Hyundai Ideal Electric Company

Mansfield, Ohio – Four building expansions

65,000 Sq. Ft. Manufacturing Bldg. 65' high with 80 ton crane and mass concrete foundations
22,000 Sq. Ft. assembly building w/ (2) 40 T overhead cranes in 2009
30,000 Sq. Ft. machine shop with (2) 50T overhead cranes and (2) three million pound machine foundations completed in 2013
Q/A Test floor expansion

Ashland Chemical Co.

Ashland, Ohio

Five additions. (125,000 Ft.² total) (1990-2000)
Tank farm dike project

F. E. Myers

Ashland, Ohio

(3) projects with cumulative total cost over \$2 million.
1986 20,000 Ft² office building.
\$ 1,000,000.00 test lab building
Test lab expansion in 2012 with 48' deep test basin

Hydromatic Pumps
Ashland, Ohio

230,000 Ft² re-roof project in 1981.
60,000 Gallon Test Facility

Atlas Bolt & Screw
Ashland, Ohio
Dale Knotek
(419) 289-6171

Four building additions.
54,000 Ft² cumulative.

Nelson Tree Service (now Altec)

Ashland, Ohio

20,000 Ft² factory and office.
Plus (2) Expansions

Liquibox Corporation
Ashland, Ohio

Initial Factory Building and (9)
subsequent expansions including
40,000 SF manufacturing,
16,000 SF warehousing
9,000 SF Development lab
completed in 2016
19,000 SF Blowmold Dept.
Expansion in 2018
Production space expansion in 2020

David Fruth
(614)704-7397

Office/Institutional

Branch Banks in Ashland

Huntington Bank East Main Street

Huntington Bank College Avenue (now the Ashland Community Foundation)

First Federal Savings and Loan Katherine Avenue (now First Merit Bank)

First Merit Bank East Main Street

First National Bank, Cleveland Avenue (now the Moose Club)

Farmers State Bank West Salem Main Bank \$1.9M completed in 2017

Brenda Strunk (330) 201-3924

Church Building and/or Additions

Trinity Lutheran Church (3 building expansions, including Narthex entrance in 2013)
Ashland Assembly of God Church
Peace Lutheran Church
Ashland Christian School ((7) classrooms, gymnasium/locker-room addition)
Ashland Christ United Methodist Church Entrance and Elevator Lobby Expansion
**Build-out of the interior of the Ashland First United Methodist Church Fellowship
and Classroom Expansion completed in 2007**
Donna Weaver (419) 651-7020

Medical

| | |
|---|--|
| Samaritan Hospital Ashland, Ohio Ron Manchester (419) 685-0310 | 17,000 Sq. Ft. Medical Office Building 16,000 Sq. Ft. 4-Story Hospital Exp. 12,000 Sq. Ft. Medical Office Remodel 3,000 Sq. Ft. Roof Mounted Helipad Emergency Room Expansion Hospital Lab Department |
| \$ 7,000,000.00 Addition and renovation project | Madison Behavioral Unit Cath Lab Renovation MRI, Cat scan, numerous X-ray Rooms |
| \$ 6,800,000 OB Birthing Wing and infrastructure expansion project completed in 2012 | |
| \$ 4,000,000 expansion and renovation project for outpatient and ACM services completed in July 2005 | |
| Ashland Medical Outpatient Surgery Suite Ashland Medical Diagnostic Services Ashland Medical Lab Services Oncology Infusion Project Completed in 2017 | 12,000 Sq. Ft. Medical Facility \$ 1.6 Million Entrance/Exterior Renovations/Infusion Center |
| MRI replacement project in 2020 | |
| Third Street Family Medical | 2019 Renovation of Arthur Street Medical office facility |

Medical Professionals in Buildings Designed, Built, and/or Renovated by MCE:

Mansfield

Dr. Furness Dr. Becker Dr. Brown

Ashland

| | | | |
|----------------|-------------------|--------------------|----------------|
| Dr. Yoder | Dr. Breckbeuhler | Dr. Dakshinamurthi | Dr. Gelber |
| Dr. Hamernik | Dr. Heon | Dr. Thomae | Dr. Schecodnic |
| Dr. Bentley | Dr. MacDonald | Dr. Peck | Dr. Stencel |
| Dr. Shin | Dr. Torski | Dr. Kodz | Dr. Tavallaee |
| Dr. Elderbrock | Dr. Boyd | Dr. Titoras | Dr. Hess |
| Dr. Royal | Dr. Krishnamurthi | Dr. Daugherty | Drs. Raber |
| Dr. Snyder | Dr. Vore | Dr. Freeman | |

WIL Research Laboratories – Ashland, Ohio

Several animal research laboratory buildings and projects from 1991 to present including \$5.4 M
17,000 Sq. Ft. Primate Wing Expansion in 2012

Perry Welch Facility Manager
(419) 651-8263

General Office/Community

Beacon Graphics Corp.
Ashland, Ohio

16,200 Ft² office building.
Initial building and two additions.

Loudonville Schools
Loudonville, Ohio

Re-roof on elementary school.
80,000 Ft.² high school re-roof.

Crestview Schools
Adario, Ohio

33,000 Ft² Re-roof in 1990
50,000 Ft² Re-roof in 1993
90,000 Ft² Structural and metal roofing on
the new high school in 1993

Retail

Hawkins Market (1992)
Ashland, Ohio

80,000 Ft² shopping center renov

Amberwood Center
Ashland, Ohio

36,000 Sq. Ft. Shopping Center
Completed in 2007

Awards from Butler Manufacturing (Pre-engineered metal buildings)

Builder of the Year - Northeast Region

Roof Builder of the Year

Roof Builder of the Year - Northeast Region

Butler Three Million Dollar Sales Award

Butler High Performance Builder- 8 Years

OBC REQUIREMENTS FOR BUILDING DEPARTMENT PERSONNEL
(4101:7-3-01 Ohio Administrative Code)

| CERTIFICATIONS | EXPERIENCE REQUIREMENTS | EXAM MODULE REQMNTS. | | PROFESSIONAL LICENSE REQ. |
|---|---|----------------------|----------------|---|
| | | NCPCCI | or ICC | |
| BUILDING OFFICIAL 4101:7-3-01(E)(1) and (2) | <ol style="list-style-type: none"> Five years of experience in non-residential building design and construction for buildings or structures within the scope of groups regulated by the rules of the board while registered in Ohio as an architect or professional engineer, or Ten years of experience as a general contractor or superintendent of building construction for buildings or structures dealing with all phases and trades of construction including the responsibility for obtaining approvals and inspections within the scope of groups regulated by the rules of the Board, or Five years of experience employed full-time as a residential building official in a certified residential building department | NA | MM, MG, BC | Required for applicants using option #1 |
| MASTER PLANS EXAMINER 4101:7-3-01(E)(1) and (4) | Five years of experience in building design and construction for buildings or structures within the scope of groups regulated by the rules of the board while registered in Ohio as an architect or professional engineer. | 1C, 2C, 3C, 4C, 5C | B3, E3, M3, P3 | Ohio registration as an Architect or Professional Engineer. |
| BUILDING PLANS EXAMINER 4101:7-3-01(E)(1) and (6) | <ol style="list-style-type: none"> Five years as a full-time building inspector in a certified non-residential building department, or Five years of experience in building design and construction for buildings or structures within the scope of groups regulated by the rules of the Board while a registered architect or professional engineer, or Ten years of experience as a full-time skilled tradesman for structural carpentry, masonry, steel erection, or concrete construction work, subject to inspection under the code adopted for non-residential buildings, within the scope of groups regulated by the rules of the Board | 1C | B3 | Required for applicants using option #2 |
| ELECTRICAL PLANS EXAMINER 4101:7-3-01(E)(1) and (7) | <ol style="list-style-type: none"> Five years as a full-time electrical safety inspector (ESI) in a certified building department or employed as an ESI by the Ohio Dept. of Commerce, Division of Industrial Compliance, or Five years of experience in building design and construction for buildings or structures within the scope of groups regulated by the rules of the Board while a registered architect or professional engineer, or Ten years of experience as a full-time journeyman electrician or equivalent for the installation of electrical systems, subject to inspection under the code adopted for non-residential buildings or structures, within the scope of groups regulated by the rules of the Board | 2C | E3 | Required for applicants using option #2 |
| FIRE PROTECTION PLANS EXAMINER 4101:7-3-01(E)(1) and (10) | <ol style="list-style-type: none"> Five years of experience as a full-time certified fire safety inspector in a fire department or as a certified fire protection inspector for a non-residential building department, or Five years of experience as a full-time certified fire protection system designer with experience designing non-residential fire protection systems, or Five years of experience as a full-time building inspector in a certified non-residential building department, or Five years of experience in building design and construction for buildings within the scope of groups regulated by the rules of the board while a registered architect or professional engineer, or Ten years of experience as a full-time skilled tradesman for the installation of fire protection systems (automatic sprinkler systems, alternative automatic fire-extinguishing systems, standpipe systems, fire alarm and detection systems and fire pump systems), subject to inspection under the code adopted for non-residential buildings, within the scope of groups regulated by the rules of the Board. | 3C | CP | Required for applicants using option #4 |
| MECHANICAL PLANS EXAMINER 4101:7-3-01(E)(1) and (9) | <ol style="list-style-type: none"> Five years of experience as a full-time mechanical inspector in a certified non-residential building department, or Five years of experience as a full-time residential building official, residential plans examiner, residential building inspector, or residential mechanical inspector in a certified residential building department, or Five years of experience in building design and construction for buildings or structures within the scope of groups regulated by the rules of the Board while a registered architect or professional engineer, or Ten years of experience as a full-time skilled tradesman for heating, ventilating, and air conditioning ("HVAC") systems and associated refrigeration, fuel gas, and heating piping work, subject to inspection under the code adopted for non-residential buildings, within the scope of groups regulated by the rules of the Board | 4C | M3 | Required for applicants using option #3 |
| PLUMBING PLANS EXAMINER 4101:7-3-01(E)(1) and (8) | <ol style="list-style-type: none"> Five years of experience as a full-time plumbing inspector in a certified building department, or Five years of experience as a certified plumbing inspector employed full-time by either the Ohio Dept. of Commerce, Division of Industrial Compliance, or by a county board of health, or Five years of experience in building design and construction for buildings within the scope of groups regulated by the rules of the Board while a registered architect or professional engineer, or Ten years of experience as a full-time journeyman plumber or equivalent for the installation of plumbing systems, subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board | 5C | P3 | Required for applicants using option #3 |
| BUILDING INSPECTOR 4101:7-3-01(E)(1) and (11) | <ol style="list-style-type: none"> Five years of experience as a skilled tradesman, a supervisor, or a construction contractor for structural carpentry, masonry, steel erection, or concrete construction work subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or Five years of experience as a full-time non-residential building official, non-residential mechanical inspector, residential building official, residential plans examiner, residential building inspector, or residential mechanical inspector | 1B, 3B, 4B | B2, M2 | None Required |
| NON-RESIDENTIAL I.U. INSPECTOR 4101:7-3-01(E)(1) and (18) | <ol style="list-style-type: none"> Five years of experience as a construction contractor or supervisor for non-residential buildings or structures within the scope of groups regulated by the rules of the Board, or Five years of experience as a skilled tradesman for work subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or Five years of experience as a skilled tradesman for work subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or Certification as a building inspector | 1B, 3B, 4B | B2, M2 | None Required |
| ELECTRICAL SAFETY INSPECTOR 4101:7-3-01(E)(1) and (17) | <ol style="list-style-type: none"> Journeyman electrician or equivalent for 4 years, 2 as an electrician foreman, and 2 years as a building department ESI trainee, or Journeyman electrician or equivalent for 4 years and 3 years as a building department ESI trainee, or Four years of experience as a building department ESI trainee, or Journeyman electrician or equivalent for 6 years; or An electrical engineer registered in the State of Ohio | 2A, 2B | E1, E2 | Required for applicants using option #5 |
| FIRE PROTECTION INSPECTOR 4101:7-3-01(E)(1) and (13) | <ol style="list-style-type: none"> Five years of experience in the installation of fire protection systems (automatic sprinkler systems, alternative automatic fire-extinguishing systems, standpipe systems, fire alarm and detection systems and fire pump systems) subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or Five years of experience as a certified fire safety inspector or a certified fire protection system designer | 1B, 3B | CA, CF | None Required |
| MECHANICAL INSPECTOR 4101:7-3-01(E)(1) and (14) | <ol style="list-style-type: none"> Five years of experience as a skilled heating, ventilating, and air conditioning (HVAC) system and associated refrigeration, fuel gas, and heating piping tradesman for work subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or Five years of experience as a full-time residential building official, residential plans examiner, residential building inspector, or residential mechanical inspector | 4B | M2 | None Required |
| PLUMBING INSPECTOR 4101:7-3-01(E)(1) and (16) | <ol style="list-style-type: none"> Seven years of experience in the installation of plumbing, subject to inspection under the code adopted for non-residential buildings within the scope of groups regulated by the rules of the Board, or A degree in engineering or architecture and three years of experience in plumbing system design. | 5A, 5B | P1, P2 | None Required |

NOTES TO OBC CERTIFICATION REQUIREMENTS FOR BUILDING DEPARTMENT PERSONNEL

- NOTE 1. Only experience directly related to buildings or structures within the scope of groups regulated by the Ohio Building Code is acceptable for any class certification. THIS DOES NOT INCLUDE ONE-, TWO-, OR THREE-FAMILY STRUCTURES.
- NOTE 2. All applicants may obtain credit for one year of the required experience through education pursuant to 4101:7-3-01(F)(6) OAC. Documentation must be submitted with the application.
- NOTE 3. All trainee applicants must be under the direct supervision of a person certified in the trainee's respective field. Sponsor and Supervisor forms must be signed by the Building Official and the certified supervisor, respectively. Submit with application.
- NOTE 4. Applicants may contact either: Prometric, 1360 Energy Lane, St. Paul MN 55108, (800) 864-5309, www.prometric.com for NCPCCI exams or, International Code Council, National Certification Services, 900 Montclair Road, Birmingham, AL 35213, (888) 422-7233, www.iccsafe.org for scheduling examinations.
- NOTE 5. Only enforcement, inspection, or plans examination experience performed (a) prior to 1984, for a non-residential building department certified by the board of building standards to exercise enforcement authority for buildings or structures within the scope of groups regulated by the rules of the board; (b) for an agency or jurisdiction outside the state of Ohio enforcing a model non-residential building code of a national model code organization or a code adopted for the respective buildings or structures of the types regulated by the rules of the board; or (c) certification by the department of commerce, division of industrial compliance, as a plumbing inspector when application is made for board certification as a plumbing inspector. THIS DOES NOT INCLUDE ONE-, TWO-, OR THREE-FAMILY STRUCTURES.
- NOTE 6. Module description:
- | <u>NCPCCI:</u> | <u>ICC:</u> |
|---------------------------------------|---|
| 1A – Building 1-, 2 -Family Dwelling | MM – Management |
| 1B – Building General | MG – Legal |
| 1C – Building Plan Review | BC – Building Codes and Standards |
| 2A – Electrical 1-, 2-Family Dwelling | CA – Commercial Fire Alarm Inspector |
| 2B – Electrical General | CF – Commercial Sprinkler Inspector |
| 2C – Electrical Plan Review | CP – Commercial Fire Sprinkler Plans Examiner |
| 3B – Fire Protection General | B1 – Residential Building Inspector |
| 3C – Fire Protection Plan Review | B2 – Commercial Building Inspector |
| 4A – Mechanical 1-, 2-Family Dwelling | B3 – Building Plan Examiner |
| 4B – Mechanical General | E1 – Residential Electrical Inspector |
| 4C – Mechanical Plan Review | E2 – Commercial Electrical Inspector |
| 5A – Plumbing 1-, 2-Family Dwelling | E3 – Electrical Plan Examiner |
| 5B – Plumbing General | M1 – Residential Mechanical Inspector |
| 5C – Plumbing Plan Review | M2 – Commercial Mechanical Inspector |
| | M3 – Mechanical Plan Examiner |
| | P1 – Residential Plumbing Inspector |
| | P2 – Commercial Plumbing Inspector |
| | P3 – Plumbing Plan Examiner |
- NOTE 7. All applicants must complete the Ohio Building Code Academy during their initial certification period.
Exceptions:
- Medical gas piping inspectors pursuant to paragraph (E)(20) of 4101:7-3-01.
 - Industrialized unit inspectors or residential industrialized unit inspectors.
 - Plumbing inspectors certified pursuant to Chapter 3703. of the Revised Code with five years of experience as full-time employees of the division of industrial compliance in the Ohio Dept. of Commerce or of county boards of health who are seeking plumbing inspector certification.
 - Individuals who have completed the code academy within thirty-six months immediately preceding the date of receipt of initial certification.
- NOTE 8. Applicants for Electrical Safety Inspector must be authorized by the Board *prior* to taking the required examinations. Applicants for the Electrical Safety Inspector who fail the examinations twice must enter the Electrical Safety Inspector Training Program.
- NOTE 9. Completion of non-residential exam modules may be accepted as equivalent to the respective required residential certification modules when applying for residential certifications.

File Attachments for Item:

P-8 Sholtis, Scott - ESI, BI

Cert ID: 8976

Current Certifications: None

Staff Notes: Received after ESIAC opinions. Appears to meet qualifications for ESI.
Recommend request for additional information on BI.

Committee Recommendation:

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOLTIS
Last Name

Scott
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOLTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| MIDPARK HIGH SCHOOL | 1997 |
| CLEVELAND STATE UNIVERSITY / TRIC | |
| Related Vocational or Technical Training | Years' Experience |
| IBEW LOCAL # 38 NATIONAL JOINT APPRENTICESHIP AND TRAINING | 7 yrs |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| INTERNATIONAL BROTHERHOOD of ELECTRICAL WORKERS CITY OF BROOKLYN | 7 yrs 5 yrs |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

SHOLTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|---|
| <p>Example: Children's Hospital, Toledo Structural steel work on addition</p> | <p>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</p> | <p>July 2013-May 2014 (10 months)</p> |
| <p>CLEVELAND CLINIC, CLEVELAND, OHIO POWER DISTRIBUTION 89th STREET PARKING GARAGE - CLEVELAND CLINIC RAN PIPE/CIRCUITS (BRANCH)</p> | <p>ZENITH SYSTEMS IBEW LOCAL #38 (216)621-3090 ZENITH SYSTEMS IBEW LOCAL #38 (216)621-3090</p> | <p>1/07 - 9/07 8 months 9/07 - 10/08 13 months</p> |
| <p>Total Experience on This Page (In Months):</p> | | |

SHULTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|--|---|---------------------------------|
| STONE BRIDGE CONDOS - LLEVEL MAIN POWER/UNIT WIRING | ARROW ELECTRIC IBEW LOCAL #38 (216) 621-3090 | 10/08 - 12/09 14 MTHS |
| KEY BANK REMODEL (LLEVEL) REMOVAL/REINSTALL ELECTRICAL CIRCUITS | HARRINGTON ELECTRIC IBEW LOCAL #38 (216) 621-3090 | 12/09 - 12/10 |
| CROLMER PARK - MULTIPLE LOCATIONS POWER DISTRIBUTION - BRANCH CIRCUITS - PIPE WORK - | ZENITH SYSTEMS IBEW LOCAL #38 (216) 621-3090 | 12/10 - 12/14 |
| CITY ELECTRICIAN - MAINTAIN AN ELECTRICAL THROUGHOUT THE CITY | CITY OF BROOKLYN 6161 EUBLE RD (216) 433-7192 | 11/07 - PRESENT |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Skoltis
Last Name

Scott
First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions? Yes

No

If you answered "No" please explain below:

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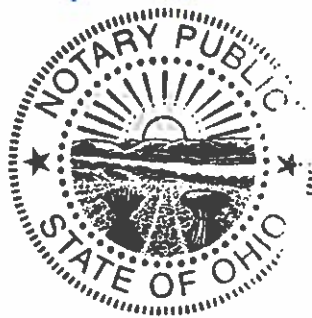
SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: 

Subscribed and duly sworn before me according to law, by the above named applicant this day 7th of November in the year 2022 at City of Brook Park County of Cuyahoga and State of Ohio.

Notary Public: Cherri K. Adkins, exp 1/25



Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOULTS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" if Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOCTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-----------------------|
| Formal Education | Date Graduated |
| MID PARK HIGH SCHOOL | 1997 |
| CLEVELAND STATE UNIVERSITY / TMC | |
| Related Vocational or Technical Training | Years' Experience |
| NATIONAL JOINT APPRENTICESHIP AND TRAINING | 7 yrs |
| FBEW LOCAL #38 | |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| | |
| Place of Employment: M. SOKOL BUILDERS | Years' Employed 6 yrs |
| CITY OF BROOK PARK | 5 yrs |
| FBEW LOCAL #38 | 2 yrs |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

SHOLTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|-----------------------------------|
| Example: Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| STORAGE FACILITY - STRUCTURAL WORK - STEEL/ WOOD. | M. SKOL BUILDERS MIDDLEBURG HEIGHTS, OH (416) 409-4811 | 2/2005 - 9/2006 |
| - MULTIPLE SINGLE FAMILY HOMES - WOOD STRUCTURES ELECTRICAL WORK - STUD FRAMING | M. SKOL BUILDERS MIDDLEBURG, OHIO (216) 409-4811 | 9/2006 - 9/2012 |
| SHIMBLE INSTALL - | | |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOLTIS
Last Name

SCOTT
First Name

BBS Certification ID

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|----------------------------------|
| <p>CITY OF BROOK PARK. BUILDING MAINTENANCE - DEPT. MAINARD MUNICIPAL BUILDINGS - PLUMBING, ELECTRICAL, CONSTRUCTION</p> | <p>CITY OF BROOK PARK 6161 ENGLE RD (216) 433-7192</p> | <p>11/17 - CURRENT</p> |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SHOLTIS
Last Name

Scott
First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions? Yes

No

If you answered "No" please explain below:

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SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: _____

Subscribed and duly sworn before me according to law, by the above named applicant this day 7th of November in the year 2022 at City of Beavercreek County of Cuyahoga and State of OHIO.

Notary Public: _____

Cheri H. Adkins exp. 6/8/25



File Attachments for Item:

P-9 Oliver, Christopher - ESI

Cert ID:

Current Certifications: None

Staff Notes: Received after ESIAC submission, journeyman certificate included: recommend approval.

Committee Recommendation:

Oliver
Last Name

Christopher
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Oliver

Last Name

Christopher

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| | |
| | |
| Related Vocational or Technical Training | Years' Experience |
| IBEW Local 648 JATC Electrician Apprenticeship | 5 |
| | |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| | |
| Place of Employment: | Years' Employed |
| Debra - Kyempel IBEW contractor | 1 |
| IBEW Local 648 | 21 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Oliver
Last Name

christopher
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

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1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|--|-----------------------------------|
| - Royal Canin Lewisburg Ohio New Construction HVAC Controls Superintendent | - Debra-Kuempel 513-271-6500 3976 Southern Ave. Cincinnati, Oh 45227 | - 04/22 - Present 8 months |
| - Miller Brewery Trenton Ohio PLC Upgrades, New system installs Instrumentation, calibration | - Molson Coors 513-892-9600 2525 Wayne Madison Rd. Trenton, Oh 45067 | - 10/13 - 03/22 8yrs. 5 months |
| - AK Steel, Sun Coke, Air products New construction for new and old processes. Supervision | - McGraw Kokosing 513-422-4521 101 Clark Blvd. Liberty Township Ohio 45044 | - 02/10 - 10/13 4yrs 8 months |
| - AK Steel Blast furnace demo and rebuild electrical construction journeyman | - Wagner Smith - No phone# closed 11825 Reading Rd. Sharonville, Oh 45241 | - 03/09 - 01/10 10 months |
| - Miami University Oxford, Ohio Dorm room and food services electrical upgrades. supervision | - Butler County Electric closed down No phone or address | - 06/08 - 02/09 8 months |
| Total Experience on This Page (In Months): | | |

Oliver

Last Name

Christopher

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|---|---|
| - Childrens Hospital Liberty Twp. New Hospital electrical construction Journeyman | - ESI Electrical 513.454.3741 4696 Dewitt Dr. Cincinnati, Oh 45246 | - 01/08 - 05/08 5 months |
| - IKEA west chester, Oh New electrical construction of the building. Journeyman | - United Electric 1309 Ethan Ave. Cincinnati, Oh 45225 | - 11/07 - 12/07 2 months |
| - AK Steel boiler house demo and rebuild. Electrical upgrade Journeyman. | - McGraw Kokosing 513.422.4521 101 Clark Blvd. Liberty Township Oh, 45044 | - 08/07 - 11/07 4 months |
| - Vora Tech. Hamilton, Ohio New data center construction Journeyman | - Glenwood Electric 859.485.3700 12250 Chandler Dr. Walton, KY 41094 | - 07/07 - 08/07 2 months |
| - Amilyn Pharmaceuticals west chester, Ohio. New construction Journeyman | - TJ Williams Electric 513.738.5366 P.O. BOX 586 Miamitown, Oh 45041 | - 11/06 - 06/07 7 months |
| - AK Steel Pickle Line electrical upgrade. demo and install new controls. Journeyman | - Lak Erie Electric 937.743.1220 360 Industrial Dr. Franklin, Oh 45005 | - 03/06 - 10/06 8 months |
| - Miami University, Oxford, Ohio Fire Alarm Upgrade Millett Hall and Rec center Apprentice | - Butler County Electric, No contact info. company is out of business | - 06/05 - 02/06 9 months |
| - Cincinnati Bell Data Center Mason, Oh. New construction of Data Center. Apprentice | - Glenwood Electric 859.485.3700 12250 Chandler Dr. Walton, KY 41094 | - 09/04 - 05/05 9 months |
| - Miami University, Oxford, Ohio Fire Alarm Upgrade Upham Hall Apprentice. | - Butler County Electric, No contact info. out of business | - 05/03 - 08/04 1 year 3 months |
| - Middletown Paper Board. Middletown, Ohio. Demo paper mill electrical parts. And add new services. Apprentice. | - Rays mechanical No contact info. out of business | - 11/02 - 04/03 6 months |
| - Dynamic Electric shop work. putting fixtures together and wiring devices. Apprentice | - Dynamic Electric. No contact info. Out of business | - 08/02 - 10/02 3 months |
| - I honestly am having trouble placing the exact project I was on. Apprentice | - Gessel Electric Inc. 513.863.2994 1039 Symmes Ave. Hamilton, Oh OH 45015 | - 03/02 - 07/02 5 months CMO |
| - McCullough Hyde Hospital. Oxford Ohio. New addition to the hospital New construction. apprentice | - ESI Electrical 513.454.3741 | - 01/02 - 07/02 8 months |
| - Foundation Field Hamilton, Ohio New construction of baseball field Lighting. Apprentice | - Matthews Electric No contact info. out of business | - 08/01 - 01/02 6 months |
| Total Experience on This Page (In Months): | | |

Disregard Error → CMO

Oliver
Last Name

Christopher
First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?
 Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3) Yes No

3. If YES, were you discharged under honorable conditions? Yes No

If you answered "No" please explain below:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Chris Oliver

Subscribed and duly sworn before me according to law, by the above named applicant this day 14 of November in the year 2022 at Butler, Trenton, County of Butler and State of Ohio

Notary Public: Amy R Ferrera

SEAL



STATE OF OHIO

Certificate of Completion of Apprenticeship

ISSUED BY
THE OHIO STATE APPRENTICESHIP COUNCIL

This is to certify that: **CHRISTOPHER OLIVER**
has fulfilled the terms of the apprenticeship agreement in accordance with the registered standards and requirements, with related instruction and is hereby recognized and qualified as a journey person
ELECTRICIAN

together with all the rights, privileges and opportunities which everywhere pertain thereto.

In testimony Whereof, the Ohio State Apprenticeship Council of the Ohio Department of Job and Family Services in cooperation with the Bureau of Apprenticeship and Training, U.S. Department of Labor, do affix the Great Seal of the State of Ohio.

Witnessed Over Our Signatures and Seal:

Sponsored by:

Given at Columbus in the State of Ohio,

Butler/Warren County
Electrical JATC
Hamilton, Ohio

this 15th *day of* July *A.D.* 2006

Jean R. Sickles
DIRECTOR, OHIO STATE APPRENTICESHIP COUNCIL
Lawrence D. Urbank
CHAIRMAN, OHIO STATE APPRENTICESHIP COUNCIL

BOB TAFT
GOVERNOR OF OHIO



Butler Technology and Career Development Schools

Adult Workforce Education Certificate of Completion

This certifies that

Chris Oliver

has satisfactorily completed 900 hours of adult career-technical training in

I.B.E.W. - Electrical Apprenticeship


Coordinator




V.P. - Adult Workforce Education



The Trustees
of



The National Joint Apprenticeship and Training Committee

for the
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
and the
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION

upon the Recommendation of the
Butler & Warren County Electrical
JOINT APPRENTICESHIP AND TRAINING COMMITTEE

do hereby present this diploma to

Christopher M. Oliver

In recognition of satisfactory completion of their indenture, as indicated by acquiring the minimum number of on-the-job hours, related studies and/or classroom training; thereby accomplishing a degree of knowledge and skill level which is mastered only by those who attain the goals and standards set forth by this Industry. The above named graduate is therefore worthy and deserving of the Internationally Recognized classification of

Journeyman Wireman

which is herewith conferred as acknowledged by the signatures of the Trustees

on this thirtieth day of May in the year 2006

Edwin D. Hill
President, IBEW

John M. Gian
Executive Vice President & CEO, NECA



John C. ...
J.A.T.C. Chairman
[Signature]
J.A.T.C. Secretary

File Attachments for Item:

P-10 Taylor, Ted - PI

Cert ID: 8974

Current Certifications: None

Staff Notes: Employer is OCILB plumbing contractor, research indicates high volume permits for multifamily new builds in Franklin county. Recommend approval.

Committee Recommendation:

Taylor
Last Name

Ted
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input checked="" type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| West Jefferson High School | 2008 |
| Related Vocational or Technical Training | Years' Experience |
| APHC | 4 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| MJ Baumann | 9 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|--|---|
| <p><i>Example:</i> Children's Hospital, Toledo Structural steel work on addition</p> | <p>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</p> | <p>July 2013-May 2014 (10 months)</p> |
| <p>Single & Multi family New build plumbing</p> | <p>MS Baumann 6400 Broughton Ave Columbus, OH 614-759-7100</p> | <p>04/27/14 - Present</p> |
| <p>Total Experience on This Page (In Months): 103</p> | | |

Last Name

First Name

BBS Certification ID

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|---|
| | | |
| Total Experience on This Page (In Months): | | |

Last Name

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty table for explanation of "No" answers.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: [Handwritten Signature]

Subscribed and duly sworn before me according to law, by the above named applicant this day 10th of NOVEMBER in the year 2022 at HUNTINGTON BANK, County of FRANKLIN and State of OHIO.

Notary Public: [Handwritten Signature]



JONATHAN M MOORE
Notary Public, State of Ohio
My Comm. Expires 08-01-2024

Lookup Detail View

Name and Address

| Name | Mail Address | Public Address |
|------------------|---|---|
| JOSEPH E BAUMANN | 5533 Dublin Rd Dublin, OH 43017-1505 | 5533 Dublin Rd Dublin, OH 43017-1505 |

Registration Information

| Credential | License Type | Issue Date | Expiration Date | Status | Reason | Company |
|------------|--------------|------------|-----------------|-------------------|-----------------|-------------------|
| PL.33047 | Plumbing | 01/01/2022 | 12/31/2022 | ACTIVE IN RENEWAL | RENEWAL PENDING | MJ BAUMANN CO INC |

Renewal Requirements

| Formatted Credential | CE Requirements Completed | Estimated Amount Due |
|----------------------|---------------------------|----------------------|
| PL.33047 | No | \$60.00 |

Generated on: 11/16/2022 11:30:33 AM

File Attachments for Item:

C-1 Farley, Shawn - ESI

Cert ID:

Current Certifications: None

Farley

Shawn

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Farley

Shawn

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| Eastern Brown High School | 05/2000 |
| Related Vocational or Technical Training | Years' Experience |
| IBEW | 16 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| US Army Reserves | 6 |
| Place of Employment: | Years' Employed |
| Archiabie Electric | 16 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Farley

 Last Name

Shawn

 First Name

 BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|--|
| <p><i>Example:</i> Children's Hospital, Toledo Structural steel work on addition Local 212 Apprentice (August 2006 - May 2011)</p> | <p>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 Archiable Electric 3803 Ford Circle Cincinnati, OH 45227 (513) 621-1307</p> | <p>July 2013-May 2014 (10 months)</p> |
| <p>Total Experience on This Page (In Months):</p> | | <p>57</p> |

Last Name

First Name

BBS Certification ID

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|--|
| Children's Hospital, Mason Renovation (Journeyman) | Archiabile Electric 3803 Ford Circle Cincinnati, OH 45227 (513) 621-1307 | May 2011 - February 2012 (9 months) |
| St. Elizabeth, Fort Thomas Cancer Care Renovation (Journeyman) | | February 12-June 2013 (16 months) |
| UC Hospital, Cincinnati Cafeteria Renovation & General Maintenance (Journeyman) | | June 2013 - January 2015) (19 months) |
| Children's Hospital, Cincinnati Built T Building from ground (Journeyman) | | January 2015 - August 2017) (19 months) |
| Children's Hospital, Cincinnati Lincoln Building Renovation (Journeyman) | | August 2017 - February 2018 (6 months) |
| Children's Hospital, Cincinnati Built MEP Racks for G Building (Foreman) | | February 2018 - October 2018 (8 months) |
| Children's Hospital, Cincinnati Ran Overhead & In-wall conduit crews for G Building (Foreman) | | October 2018 - January 2021 (27 months) |
| Children's Hospital, Cincinnati Ran Overhead & In-wall conduit for B Building Renovation (Foreman) | | January 2021 - Present (22 months) |
| Total Experience on This Page (In Months): | | 126 |

Farley

Shawn

Last Name

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty table for explanation of "No" answers.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Shawn Farley

Handwritten signature of Shawn Farley

Subscribed and duly sworn before me according to law, by the above named applicant this

day 1st of November in the year 2022 at US Bank 530 E. University, County of Hamilton and State of Ohio

Notary Public:

Handwritten signature of Cathleen Joan Helton



CATHLEEN JOAN HELTON
Notary Public
State of Ohio
My Comm. Expires
October 4, 2027

File Attachments for Item:

C-2 Haines, Jeffrey - BI

Cert ID: 8970

Current Certifications: None

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|---|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input checked="" type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| B.S. Wilmington College | 1983 |
| Related Vocational or Technical Training | Years' Experience |
| 30 Construction OSHA | 30 |
| See attached certifications | 30 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| USMC- 0311,0331,0352,0302 Combat Arms Fortifications | 25 |
| Place of Employment: | Years' Employed |
| Gilbane Construction Company | 4 |
| Quandel Construction Company | 15 |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|---|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Marion Cancer Center, Marion General Superintendent all trades | Gilbane Building Co 145 E Rich St Columbus, Ohio 43215 614-948-4046 | August 2021- October 2022 (14 Months) |
| Marzetti Plant Expansion, Columbus General superintendent, All trades | Gilbane Building Company | November 2020- August 2021 (20 Months) |
| Marion Hospital Private Room Expansion General Superintendent, All Trades | Gilbane Building Company | August 2019 -November 2020 (15 Months) |
| OSU Players Lounge Project Superintendent, All Trades | Quandel Construction 3003 N.Front St Harrisburg, PA 17110 717-657-0909 | June 2018 - August 2019 (14 Months) |
| Mount Carmel Health Hospital, Grove City Site development, Structural Concrete Structural Steel, Shell and core, neo-natal floors | Quandle Construction | November 2015- June 2018 (31 months) |
| Total Experience on This Page (in Months): | | 66 |

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|--|---|---|
| <p>Equestrian Barn and Ring, Ohio State Expo- Spec build CMR project under Ohio Facilities Commission. Project Superintendent A 600 x 300 ac. Steel building with an adjacent 150 x 300 covered riding ring adjacent to it to support Quarter Horse congress.</p> | <p>Ruscilli Construction 5815 Wall Street Dublin Ohio 43017 614-876-9484</p> | <p>February 2015-November 2015 (9 months)</p> |
| <p>NCR Chimes, Assisted Living Renovation- Occupied Renovation GC project, Superintendent 58 single bedroom units that received upgrades, 12,000 sq ft 2 story wood frame addition for office and medical support, elevators upgrade and installation, complete mechanical upgrade and addition of Kitchen and dining area.</p> | <p>Ruscilli Construction</p> | <p>May 2014-February 2015 (9 months)</p> |
| <p>Murfield Golf Club, Executive Suites- Design Build GC project, Superintendent This building has a high end finish and is a 3 story multi use building adjacent to Golf course. The building has 6 Executive suites, a floor for entertainment activities, mechanical and interview rooms on lower level.</p> | <p>Ruscilli Construction</p> | <p>November 2013-May 2014 (7 months)</p> |
| <p>MET, Ether ridge Hall, Miami University- Spec Build CM at Risk Superintendent A Multi-story residence hall consisting of a basement, 3 living space floors and an Attic that contains the majority of the HVAC equipment. It is a steel structure with a brick veneer exterior. Approximately 138,000 sq ft.</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>February 2012- November 2012 (21 months)</p> |
| <p>Building 409 Dayton VA Campus- Federal Spec Build Renovation-GC-Superintendent This building was originally built in 1940 as a hospital and was repurposed into an office building. 3 stories plus and Attic we demolished the interior structure of the the building to the walls and constructed all new mechanicals, office spaces and common areas.</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>August 2011-February 2012 (6 months)</p> |
| <p>Total Experience on This Page (In Months):</p> | | <p>52</p> |

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To (MM/YY) |
|--|---|---|
| <p>Green Tree Health Sciences Academy- Design Build-GC-Assistant project Manager/Superintendent 34,000 sq ft single story steel frame brick veneer that provides educational space for Warren County JVS, Miami University and Cincinnati State. It has chemistry and nursing labs included with the classrooms and office spaces. This is a first of its kind partnership that was funded through a federal Grant to the City of Middletown who was the owner. It was built on Atrium Medical Centers Campus who acted as the Construction Agent and designed to the owners specifications in Partnership with MSA of Cincinnati.</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>September 2010-August 2011 (12 months)</p> |
| <p>Graham High School- Agency CM for OSFC Superintendent-Asst. Project Manager/Superintendent 158,000 Sq ft Renovation of existing High School. This was an occupied renovation that had a challenging schedule that included the demolition and reconstruction of the Kitchen and dining room during summer vacation. This project took two years to complete.</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>July 2009-September 2010 (14 months)</p> |
| <p>Capitol City Group Head Quarters-Spec Build - CM at Risk-Superintendent This is their Headquarters Office, maintenance Facility and yard. The construction consisted of Steel framing and Pre-cast concrete decking and walls that connected to a pre-manufactured steel building. It sits on a 10 ac site that was developed for their yard/storage facility.</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>May 2008-July 2009 (14 months)</p> |
| <p>Salvation Army ARC - Spec Build CM at Risk- Superintendent 198,000 Sq ft renovation of a manufacturing facility that was originally constructed in 1901 to build model T engines for Henry Ford. Upon completion of this project we had installed offices, Warehouse space, manufacturing space, retail space, Kitchen with dining room and residential spaces. This construction also featured a Chapel and 2 apartments that had high end finishes</p> | <p>Quandel Construction Company 3003 N Front Street Harrisburg, PA 17110 717-657-0909</p> | <p>April 2006-May 2008 (25 months)</p> |
| | <p>Total Experience on This Page (In Months):</p> | <p>65</p> |

Haines

Jeffrey

Last Name

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty text box for explanation.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: [Handwritten Signature]

Subscribed and duly sworn before me according to law, by the above named applicant this day 4th of November in the year 2022 at Lone Avenue WPCU, County of FRANKLIN and State of Ohio.

Notary Public: [Handwritten Signature]



Kai Lee
Notary Public, State of Ohio
My Commission Expires 02-01-2027

File Attachments for Item:

C-3 Jacobs, Larry - BO

Cert ID: 702

Current Certifications: MPE, Registered Architect since 1996

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|---|--|--|--|---|
| <input checked="" type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" if Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|---------------|
| Architectural Registration | | 96-1121 | 1996 |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Plans Examiner Certification (MPE) | 702 1997 |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|---|
| Formal Education | Date Graduated |
| BOSTON ARCHITECTURAL COLLEGE | 1990 |
| BACHELOR OF ARCHITECTURE | |
| Related Vocational or Technical Training | Years' Experience |
| | |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| CITY OF DAYTON BUILDING INSPECTION DEPT | 1996 - PRESENT |
| | (SEE EMPLOYMENT SECTION ABOUT WORK IN FACILITIES) |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION IN FACILITIES

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|--|------------------------------|---|---|
| CITY OF DAYTON AUG 2017 TO PRESENT UNDER BUILDING OFFICIAL SCOTT ADAMS JUNE 96 TO FEB 06 UNDER BUILDING OFFICIAL MICHAEL CROMARTIE | MASTER PLANS EXAMINER | FULL TIME REVIEW OF CONSTRUCTION DOCUMENTS FOR COMPLIANCE WITH THE OBC AND REFERENCED CODES. COMMUNICATE WITH BUILDING OFFICIAL FINDINGS OF INCOMPLETE DOCUMENT OR THE CONDITIONS AND TYPE OF APPROVAL OF THE DOCUMENTS MEET WITH CUSTOMERS TO RESOLVE CODE ISSUES AND COORDINATE WITH INSPECTOR ITEMS REQUIRING RESOLUTION PRESENT ISSUE BEFORE THE BOARD OF BUILDING APPEALS PART TIME PLANS EXAMINATION WHILE WITH CITY OF DAYTON FACILITIES MANAGEMENT DEPARTMENT (SEE EXPERIENCE SECTION OF APPLICATION) WITH DUTIES LISTED ABOVE DURING FULL TIME AT COD. BUILDING INSPECTION DEPARTMENT | AUG 17 TO PRESENT JUNE 96 TO FEB 06 MARCH 06 TO JUNE 2017 |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|---|--|---|
| RESPONSIBLE FOR MAINTAINING LIFE SAFETY IN CITY OF DAYTON BUILDINGS, PERSONALLY RESPONSIBLE FOR OPERATION OF MECHANICAL SYSTEMS AND SUPERVISED PLUMBING AND ELECTRICAL STAFF. DID NUMEROUS IN-HOUSE PROJECTS INCLUDING 2 WELLNESS CENTERS, CITIES REPRESENTATIVE FOR A NEW RECREATION CENTER, REMODELS OF DEPARTMENTS AT CITY HALL, SAFETY BLDG, POLICE STATIONS AND RECREATION FACILITIES. | CONSTRUCTION TRADES SUPERVISOR CITY OF DAYTON FACILITIES MANAGEMENT 101 W. THIRD STREET HUMAN RESOURCE DEPT 937-333-4045 | MARCH 2006 TO MAY 2017 135 MONTHS |
| DESIGN, CONSTRUCTION DOCUMENTS, PERMITTING AND CONSTRUCTION ADMINISTRATION FOR WELLNESS CENTER FOR NATIONAL CASH REGISTER (NCR) AT 1611 S MAIN ST. BLDG NOW OWNED BY COX MEDIA GROUP | ASSOCIATE DALE SMITH ASSOCIATES. DECEASED | OCTOBER 1994 TO MAY 1996 20 MONTHS |
| CONSTRUCTION DOCUMENTS, PERMITTING AND CONSTRUCTION ADMINISTRATION FOR THE WRIGHT STATE UNIVERSITY STUDENT UNION TWO ADDITIONS TOTALING 61,300 SF AND REMODEL 101,000 SF | PROJECT MANAGER LEVIN PORTER ARCHITECTS. 3011 NEWMARK DRIVE MIAMISBURG, OH 45342 937-224-1931 | JULY 1991 TO OCTOBER 1994 38 MONTHS |
| Total Experience on This Page (In Months): | | 193 MONTHS |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|---|---|--|
| <p>CONSTRUCTION DOCUMENTS AND CONSTRUCTION ADMINISTRATION FOR THE 125 HIGH STREET, BOSTON MA PROJECT, A 27 STORY TWIN TOWER BUILDING ON A CITY BLOCK</p> <p>SAME FOR MONARCH PLACE 1414 MAIN ST SPRINGFIELD MA 01144 MIXED USE RETAIL/OFFICE WITH HIGH RISE HOTEL</p> | <p>PROJECT ASSOCIATE JULY/BRANNEN ASSOCIATES 77 MILK STREET BOSTON, MA 02111 MAY NOW BE DOING BUSINESS AS TRO JULY BRANNEN ARCHITECTS 374 CONGRESS ST BOSTON MA 02210 617-963-7566</p> | <p>MAY 1986 TO JUNE 1990 49 MONTHS</p> |
| <p>OVERSAW BUILD OUT OF RETAIL SHELL SPACES AND THE INTO EXISTING MPE SYSTEMS</p> | <p>TEENANT COORDINATOR LAFAYETTE PLACE ASSOCIATES 2 LAFAYETTE PLACE BOSTON, MA PREVIOUSLY OWNED BY MONDEU INTERNATIONAL MONTREAL, QUEBEC CANADA NOW OWNED BY THE ABBY GROUP 177 HUNTINGTON AVE BOSTON MA 02115</p> | <p>SEPT 1985 TO MAY 1986 9 MONTHS</p> |
| <p>CONSTRUCTION ADMINISTRATION FOR A \$47M 300,000 SF RETAIL/22 STORY 500 RM HOTEL IN BOSTON, MA. OVERSAW ALL FACETS OF CONSTRUCTION AND COORDINATED RESOLUTION OF ISSUES. REVIEWED SHOP DWGS AND COORDINATED OCCUPANCY OF HOTEL.</p> | <p>SITE REPRESENTATIVE MITCHELL GUIRGOLA ARCHITECTS 170 WEST 97TH STREET NEW YORK, NY 10025 CURRENT ADDRESS 630 9TH AVE #711 NEW YORK, NY 10036 212-663-4000 SUPERVISORS: JAN KEANE DONALD HUNSICKER (NOW DEAN AT BOSTON ARCHITECTURAL COLLEGE)</p> | <p>JAN 1984 TO AUG 1985 19 MONTHS</p> |
| <p>Total Experience on This Page (In Months):</p> | | <p>77 MONTHS</p> |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|--|---|---|
| <p>DRAFTSPERSON FOR IN-HOUSE ARCHITECTURAL AND ENGINEERING DEPARTMENT SPECIALIZING IN CONSTRUCTION OF DIALYSIS FACILITIES IN HOSPITALS, EXISTING BUILDINGS AND NEW STRUCTURES.</p> | <p>DRAFTSPERSON NATIONAL MEDICAL CARE 920 WINTER STREET WALTHAM, MA 02451</p> | <p>DEC 1980 TO OCT 1983 35 MONTHS</p> |
| | | |
| <p>Total Experience on This Page (In Months):</p> | | <p>35 MONTHS</p> |

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|---|
| <p><i>Example:</i> Children's Hospital, Toledo Structural steel work on addition</p> | <p>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</p> | <p>July 2013-May 2014 (10 months)</p> |
| <p>Total Experience on This Page (In Months):</p> | | |

JACOBS
Last Name

LARRY
First Name

702
BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?
 Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3) Yes No

3. If YES, were you discharged under honorable conditions? Yes No

If you answered "No" please explain below:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Larry Jacobs

Subscribed and duly sworn before me according to law, by the above named applicant this day 25 of Oct in the year 2022 at 371 W 2nd, Dayton County of Montgomery and State of Ohio

Notary Public: Ranette Mundy

SEAL



RANETTE MUNDY
Notary Public, State of Ohio
My Commission Expires:
SEPTEMBER 06, 2027

File Attachments for Item:

C-4 LeMaster, Matthew - BI, ESI

Cert ID: 8965

Current Certifications: None, has passed ESI exams

LeMaster

Matthew

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input checked="" type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

LeMaster
Last Name

Matthew
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| Teays Valley High School | May 1999 |
| Related Vocational or Technical Training | Years' Experience |
| IEC/AEC Apprenticeship | 4 Years |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |
| Anser Advisory | 4 Years |
| REI Telecom | 5 Years |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

LeMaster

Last Name

Matthew

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|----------------------------------|
| See attached "Clarification of Work Experience" for list of projects | | |
| Total Experience on This Page (In Months): | | |

LeMaster

Last Name

Matthew

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|---|---|
| | | |
| Total Experience on This Page (In Months): | | |

Clarification of work experience for my ESI and BI certifications

August 31, 2022

Matthew LeMaster



I would like to submit the following information as clarification for my previous work experience per section 7 to gain an ESI and BI interim certification. In addition to this letter, I've included my successful passing of the ICC certified Residential and Commercial electrical inspector exams. I also would like to clarify that I have successfully passed and acquired the ICC certified Soils, Structural Masonry and Reinforced concrete Special Inspector certifications.

I will provide clarification on my work experience from this date through my 23-year professional career.

Company - Anser Advisory (previously HR Gray) 2019-present

City of Columbus, Southerly Digestion Process Expansion – January 2022 - present

My duties on this project include performing construction inspection for all the excavation, cast in-place footings, cast in-place structural walls, installation of controlled back fill, construction of exterior masonry veneers, all electrical installations, all installations of biosolid pumps and piping.

City of Columbus, Fairwood Ave. Roof replacement Phase 3- April 2020 – April 2021

My duties on this project include performing construction inspection on the demolition and replacement of 83,000 sq ft of rubber covered tectum roofing, for all the electrical installations, HVAC demolitions and installations, the construction of a new penthouse structure and all lightning protection.

Solid Waste Authority of Central Ohio, New Scale House- September 2019- April 2021

My duties on this project include performing construction inspection on for all the Excavation, Construction of the cast in-place footings, construction of the cast in-place separation walls, installation of subbase, installation of concrete paving, construction of the new scale house, all the electrical, mechanical, plumbing of the new scale house, installation of a new sewage force main and 4 new truck scales.

City of Columbus, HAP Cremean Water Plant Standby Power – February 2019 – October 2019

My duties on this project include performing construction inspection on all Excavation, construction and installation of the electrical duct bank, construction of the generator foundations, installation of the 3 backup generators, installation of all underground utilities and for all the electrical installations, which included the installation of new switch gear, new ATS and all the instrumentation for the communications of the generator.

All construction work per the following was subject to application, review, approval, and inspection by an inspection authority having jurisdiction in the locale the work was performed. All work was inspected and accepted per the approved drawings by the local authority having jurisdiction.

Company- REI Telecom July 2014 – February 2019 Supervisor: Todd Younkin 740-500-8966

Spectrum/Time Warner Livingston Rd. Hub Station- June 2018 – January 2019 Use Group B

My duties on this project included supervising a crew and performing electrical installations. I was supervising a crew performing demolition of the existing 400 - amp electric service, a 100KW generator and all related service equipment. REI was contracted to install a new 600 amp service which included a new service drop, new meter base, new cam-lock box, new ATS, all new EMT, REC conduit and installed a new 150 KW Cummins generator.

Spectrum/Time Warner Dublin Hub Station- October 2017 – June 2018 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that demolished an existing 8” split face CMU wall, existing generator pad and removed a 100 KW generator. We performed

demolition of the existing 400 - amp service, with all the related service equipment, the existing UPS with all the 2 - volt batteries and related circuitry. We excavated and installed 4" PVC conduit for new parallel 500 KCMIL feeders for a new 800 - amp service. We installed a new cast-in place footing per the approved drawings for the new 8" CMU generator privacy wall and supervised a crew for the cast-in place concrete generator pad along with a house keeping pad. I supervised a crew for the installation of the new 800 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. We installed a new 200 KW Cummins backup generator. I supervised a crew for the installation of the new equipment for the back up DC system, which included DC power plant, DC to AC inverter, 4 - volt batteries with rack and all new circuits.

Spectrum/Time Warner Worthington Hub Site May 2017 – December 2017 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed an existing generator pad and removed a 100 KW generator. We performed demolition of the existing 200 - amp service, with all the related service equipment, the existing UPS with all KCMIL feeder conductors for a new 400 amp service. We installed a new cast-in place footing per the approved drawings for the new 8" CMU + 4" Brick veneer generator privacy wall and supervised a crew for the cast-in place concrete generator pad along with a house keeping pad. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. We installed a new 150 KW Cummins backup generator. supervised a crew for the installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuitry.

Spectrum/Time Warner New Rome Hub Site February 2017-November 2017 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed an existing generator pad and removed a 100 KW generator. We performed demolition of the existing 200 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuitry. We excavated and installed 4" PVC conduit for set of 500 KCMIL feeder conductors for a new 400 amp service. We installed a new cast-in place footing per the approved drawings for the new 8" CMU + 4" Brick veneer generator privacy wall and supervised a crew for the cast-in place concrete generator pad along with a house keeping pad. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. I installed a new 150KW Cummins backup generator. I supervised a crew for the installation of

the new equipment for the back up DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuitry.

The changes above are common to all the listed work for REI to follow, as well as the Use Group. Make all change to all work done for REI.

Spectrum/Time Warner Powell Hub Site August 2016 – February 2017 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed an existing generator pad and removed a 100 KW generator. We performed demolition of the existing 200 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuitry. We excavated and installed 4" PVC conduit for set of 500 mcm for a new 400 amp service. We installed a new cast-in place footing per code for the new 8" CMU + 4" Brick veneer generator privacy wall and supervised a crew for the cast-in place concrete generator pad along with a house keeping pad. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. We installed a new 150KW Cummins backup generator. I supervised a crew for the installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Spectrum/Time Warner Grandview Hub Site March 2016 – October 2016 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed an existing generator pad and removed a 100 KW generator. We performed demolition the existing 400 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuits. We excavated and installed a concrete duct bank of 4" PVC conduit for a new 600 amp service. I supervised a crew for the cast-in place concrete generator pad along with a house keeping pad. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. We installed a new 200KW Cummins backup generator. I supervised a crew for the installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Spectrum/Time Warner Grove City Hub Site November 2015 – March 2016 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed a 100 KW generator. We performed demolition of the existing 200 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuits. We excavated and installed 4" PVC conduit for a new 400 amp service. We extended the existing generator pad to accommodate and installed a new 150 KW Cummings generator. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. I supervised a crew for the installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Spectrum/Time Warner Lancaster Hub Site March 2015 – November 2015 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that demolished an existing generator pad and removed a 150 KW generator. We performed demolition of the existing 400 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuits. I supervised a crew and excavated, plus installed a duct bank for the power company's primary power source approximately $\frac{3}{4}$ of a mile to the existing hub site. We excavated from the existing building and installed 4" PVC conduit for a new 600 amp service. We installed a cast-in place concrete generator pad. We installed a cast-in place monolithic foundation for two 5 ton HVAC units for the hub. I supervised a crew for the installation of the new 600 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. We installed a new 250 KW Caterpillar backup generator. I supervised a crew for the installation of the new equipment for the back up DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Spectrum/Time Warner Washington Courthouse Hub site October 2014 – March 2015

Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed a 100 KW generator. I performed demolition of the existing 200 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuitry. We excavated and installed 4" PVC conduit for a new 400 amp service. We extended the existing generator pad to accommodate and installed a new 150 KW Cummings generator. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. I supervised a crew for the

installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Spectrum/Time Warner Portsmouth Hub Site July 2014 – October 2014 Use Group B

My duties on this project include supervising a crew, performing construction and electrical installations. REI was the GC on this project. I supervised a crew that removed a 100 KW generator. We performed demolition of the existing 200 amp service, with all the related service equipment, the existing UPS with all of the 2 volt batteries and related circuits. We excavated and installed 4" PVC conduit for a new 400 amp service. We extended the existing generator pad to accommodate and installed a new 150 KW Cummings generator. I supervised a crew for the installation of the new 400 amp service and all related service equipment, such as new electric panels, ATS, Cam-lock box, all new 4" EMT, REC conduits. I supervised a crew for the installation of the new equipment for the backup DC system, which included DC power plant, DC to AC inverter, 4 volt batteries with rack and all new circuits.

Company- Hurley Masonry April 2002 – July 2014 Supervisor/owner: Rob Hurley 740-207-0842

While employed at Hurley Masonry I was in a supervising role over a 4-6 man crew. Hurley Masonry performed a wide variety of masonry type construction. It was a good mixture of residential and commercial construction. Consisting of cast-in place footings, foundation walls of the CMU and concrete type, brick and stone veneer's, cast-in place slabs, concrete paving, curb and gutter installations, demolitions and excavation.

SWACO- Morse Rd Hub August 2012 – September 2013 Use Group S1

Hurley Masonry was a subcontractor during this project. I supervised a crew for the installation of the cast-in place footings and structural walls for the new vehicle maintenance garage, the new garage slab with a trench drain installed within it, all cast-in place curb and gutters, plus all the concrete paving for the entire facility.

Aleris New Rolled Metal Coating Addition February 2012 – August 2012 Use Group F2,H4

Hurley Masonry was a subcontractor on this project. I supervised a crew and performed different type of excavations for multiple items, such as stairs, loading docks, plumbing and

foundations, all reinforcement for the cast-in place slabs, foundations, walls and stairs, pouring, stripping and finishing all the vertical cast-in place walls, stairs and loading docks and all the necessary duties to place, finish, seal and install control joints in the building slabs.

Infosight Addition July 2010 – October 2010 Use Group S1,F2

Hurley Masonry was a subcontractor for this project. I supervised and performed the installations of the cast in-place footings for a 8" CMU wall. We installed cast in-place footings per the approved drawings with horizontal and vertical reinforcement. Then installed the 8" CMU firewall to the roof line per the OBC with 2 hour fire rated doors.

Miami Trace Bus Garage April 2008 – September 2008 Use Group S1

Hurley Masonry was a subcontractor for this project. My duties included performing and supervising a crew for the exterior shell of a new bus garage. We performed lay out, excavation, placed horizontal and vertical reinforcing steel reinforcement and poured the cast in-place footings per the approved drawings. We performed lay out for the new structure and installed 8" reinforced CMU for the exterior wall per the OBC.

Scioto Station Multi Use Development November 2006 – July 2007 Use Group A2, B, R-2

Hurley Masonry was a subcontractor for this project. My duties on this project included performing and supervising a crew to construct a multi-unit commercial structure. Hurley Masonry installed the horizontal, vertical reinforcement and poured the cast in-place footings. I supervised a crew and performed for the masonry applications. We performed lay out the new structure and installed the reinforced 12" CMU with an 8" CMU for a brick ledge around the whole building. We installed oversized brick for the exterior veneer.

Herald Square Multi Use Development July 2005 – August 2006 Use Group S2,B

Hurley Masonry was a subcontractor for this project. My duties on this project included performing and supervising a crew for the installation of the footings, foundation and brick veneer for a multi-unit commercial structure. We placed the horizontal reinforcement and the cast in-place footings. We installed the reinforced 8" CMU for the foundation walls and a 4" CMU for the brick ledge around the entire foundation. We installed a brick veneer on the structures.

Susan Dickey-Beckley office July 2004 – November 2004 Use Group S2,B

Hurley Masonry was a subcontractor for this project. My duties on this project included performing and supervising a crew for the installation of the footings, foundation and brick veneer for multi-unit commercial structures. We placed the horizontal reinforcement and the cast in-place footings. We installed the reinforced 12" CMU for the foundation walls and 8" CMU for the brick ledge around the entire foundation. We installed a brick and stone veneer on the structures.

Gahanna Sports Complex April 2004 – July 2004 Use Group A5

Hurley Masonry was a subcontractor for this project. My duties on this project included performing and supervising a crew for the installation of the footings, foundation and all interior masonry walls. We placed the horizontal reinforcement and the cast in-place footings. We installed the 8" CMU for the foundation and interior walls.

LeMaster

Last Name

Matthew

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty table with 10 rows for explanation.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: [Handwritten Signature]

Subscribed and duly sworn before me according to law, by the above named applicant this day 14 of October in the year 2022 at 1:40 pm, County of Franklin and State of Ohio

Notary Public: [Handwritten Signature]

SEAL



INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Soils Special Inspector

Given this day November 26, 2020

Certificate No. 9562637

Handwritten signature of Cindy Davis in black ink.

Cindy Davis, CBO
President, Board of Directors

Handwritten signature of Dominic Sims in black ink.

Dominic Sims, CBO
Chief Executive Officer





INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Structural Masonry Special Inspector

Given this day May 1, 2021

Certificate No. 9562637

Cindy Davis, CBO
President, Board of Directors

Dominic Sims, CBO
Chief Executive Officer





INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Residential Electrical Inspector

Given this day March 2, 2022

Certificate No. 9562637

Handwritten signature of Cindy Davis in black ink.

Cindy Davis, CBO
President, Board of Directors

Handwritten signature of Dominic Sims in black ink.

Dominic Sims, CBO
Chief Executive Officer





INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Commercial Electrical Inspector

Given this day July 23, 2022

Certificate No. 9562637

Handwritten signature of Cindy Davis in black ink.

Cindy Davis, CBO
President, Board of Directors

Handwritten signature of Dominic Sims in black ink.

Dominic Sims, CBO
Chief Executive Officer





INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Electrical Inspector

Given this day July 24, 2022

Certificate No. 9562637

A handwritten signature in black ink that reads "Cindy Davis".

Cindy Davis, CBO
President, Board of Directors

A handwritten signature in black ink that reads "Dominic Sims".

Dominic Sims, CBO
Chief Executive Officer



This certificate is the property of ICC and must be returned to ICC in the event of suspension or revocation of the certificate.



INTERNATIONAL CODE COUNCIL

MATTHEW LEMASTER

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Reinforced Concrete Special Inspector

Given this day September 21, 2022

A handwritten signature in black ink that reads "Cindy Davis".

Cindy Davis, CBO
President, Board of Directors

Certificate No. 9562637

A handwritten signature in black ink that reads "Dominic Sims".

Dominic Sims, CBO
Chief Executive Officer



File Attachments for Item:

C-5 Lynch, Benjamin - PI

Cert ID: 8969

Current Certifications: None

Lynch
Last Name

Benjamin
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input checked="" type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" if Trainee)

| Description | | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|--------------------|---------------|
| Architectural Registration | | | | |
| P.E. Registration | | | | |
| Res | Non-Res | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | | |
| Building Plans Examiner Certification | | | | |
| Mechanical Plans Examiner Certification | | | | |
| Fire Protection Plans Examiner Certification | | | | |
| Electrical Plans Examiner Certification | | | | |
| Plumbing Plans Examiner Certification | | | | |
| Fire Protection Inspector Certification | | | | |
| Electrical Safety Inspector Certification | | | | |
| Plumbing Inspector Certification | | | | |
| Fire Safety Inspector Certification | | | | |
| Fire Protection System Designer Certification | | | | |
| Medical Gas Piping Inspector Certification | | | | |

Lynch
Last Name

Benjamin
First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|--------------------|
| Formal Education | Date Graduated |
| <u>Geneva high school</u> | <u>2008</u> |
| Related Vocational or Technical Training | Years' Experience |
| | |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| <u>Robert E. Anchor Plumbing LLC.</u> | <u>7 1/2 Years</u> |
| | |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

Lynch
Last Name

Benjamin
First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|--|--|--|
| <i>Example: Children's Hospital, Toledo Structural steel work on addition</i> | <i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i> | <i>July 2013-May 2014 (10 months)</i> |
| <i>Rough in Underground, Venting & waterlines, and All finish work</i> | <i>Country Club CTR III LTB 925 East 26th st, Ashtabula, Oh 44004</i> | <i>June 2015 - Feb 2016 (9 months)</i> |
| <i>Rough in Underground, Venting & waterlines. set toilets flushvalves & Lavatory.</i> | <i>Nassif Honda 2920 GH Drive Austintburg, Oh 44010</i> | <i>Feb 2016 - NOV 2016 (9 months)</i> |
| <i>Rough in Underground, Venting & waterlines. set toilets & Lavatories</i> | <i>ACMC 1020 South Broadway Geneva, Oh 44041</i> | <i>Mar 2016 - May 2016 (2 months)</i> |
| <i>Rough in underground in multiple Buildings. Rough in Vent & waterlines in multiple Buildings. set fixtures in multiple Buildings, run gas Piping & Air lines.</i> | <i>GOTL WWTP 4843 North Broadway Geneva-On-the-Lake, OH 44047</i> | <i>Mar 2016 - April 2018 (25 months)</i> |
| Total Experience on This Page (In Months): | | <i>45 months</i> |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Lynch
Last Name

Benjamin
First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|--|--------------------------------------|
| Run Copper Piping to new Heaters on roof | UH Conneaut 158 West Main rd. Conneaut, Oh 44030 | Oct 2017 - Mar 2018 (5 months) |
| Rough in Underground Plumbing, Venting and waterlines, Set toilets, Lavs & Drinking Fountain. | GR Rivier Rubber & Plastic 2029 AETNA RD. Ashtabula, OH 44004 | June 2017 - July 2019 (25 months) |
| Rough in Underground Plumbing, Venting and waterlines. Set toilets & Lavs. | McDonalds Corp 312 State Street Conneaut, Oh 44030 | June 2018 - Oct 2018 (4 months) |
| Rough in Underground Plumbing, Venting and waterlines, Set toilets & Lavs. | McDonalds Corp 1807 S. Broadway (SR 534) Geneva, Oh 44041 | June 2018 - Aug 2018 (2 months) |
| Rough in Underground Plumbing, Venting Set trench drains & Laundry tub. Run Air lines & Gas into Addition | DForce Holding LLC 2950 Industrial Park Dr. Austinburg, Oh 44010 | May 2018 - Jan. 2020 (20 months) |
| Rough in Underground Plumbing, Venting & waterlines. Set toilets & Lavs | Running horse Farm LLC. 389 N Stoltz Rd Geneva, Oh 44041 | Aug 2018 - April 2019 (8 months) |
| Rough in Underground Plumbing, Venting & waterlines. Set fixtures | Jefferson United Methodist Church 125 East Jefferson St. Jefferson, Oh 44047 | Jan 2019 - Aug 2019 (7 months) |
| Rough in Underground Plastic, Venting & Waterline. Run gas to stove & furnace | Michael & CJ Hines 80 Sunset St. Orwell, OH 44076 | May 2019 - June 2020 (13 months) |
| Rough in Underground Plastic, Venting & waterlines. Set fixtures | ACMC 2420 Lake Ave. Ashtabula, Oh 44004 | June 2019 - Mar 2020 (9 months) |
| Rough in Underground Plastic, Venting & waterlines. Set fixtures | Dollar General 4830 N. Ridge Rd. E. Geneva, Oh 44041 | April 2021 - July 2021 (3 months) |
| Rough in Underground Plastic, Venting & waterlines. Set fixtures. Run Gas to furnace room. | State Rd Drive Throuh 4135 State Rd. Ashtabula, OH 44004 | Dec 2021 - Feb 2022 (2 months) |
| Rough in Underground Plastic, Venting & waterlines. Set fixtures. tie in gas & run to furnace room. | Geneva Waste Water LR Building 141 North AVE Geneva, Oh 44041 | Feb 2022 - April 2022 (2 months) |
| Rough in Underground & Venting | Romano Laundry 1750 W Prospect/US Rt 20 Ashtabula, Oh 44004 | May 2022 - June 2022 (1 month) |
| Rough in Underground, Venting & waterlines. | Grand rivier rubber 2029 Aetna Rd. Ashtabula, Oh 44004 | June 2022 - Aug 2022 (2 months) |
| Total Experience on This Page (In Months): | | 103 months |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Lynch
Last Name

Benjamin
First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: *Benjamin Lynch*

Subscribed and duly sworn before me according to law, by the above named applicant this day 31 of October in the year 2022 at Ashtabula, County of Ashtabula and State of Ohio.

Notary Public: *Ann L. Hegfield*



ANN L. HEGFIELD
Notary Public, State of Ohio
Recorded in Ashtabula County
My Commission Expires
February 25, 2024



**Department
of Commerce**

Division of Industrial Compliance

Mike DeWine, Governor
Sheryl Maxfield, Director

04/21/2021

BENJAMIN LYNCH



State of Ohio Department of Commerce
CERTIFIED BACKFLOW TESTER

BENJAMIN LYNCH

Cert# 12288

Expiration Date: 03/16/2024

Plumbing Section Supervisor

Superintendent

**MIKE DEWINE
GOVERNOR**



**GEOFFREY D. EATON
SUPERINTENDENT**

**DEPARTMENT OF COMMERCE
DIVISION OF INDUSTRIAL COMPLIANCE**

CERTIFIED BACKFLOW TESTER

This is to certify that **BENJAMIN LYNCH**

Having met the requirements pursuant to the provisions of the Ohio Revised Code Section 3703.21, is hereby certified to perform field testing of backflow devices.

This certificate **12288** is effective for three years expiring **03/16/2024** and thereafter upon renewal of certification pursuant to 1301:3-7-05 of the Ohio Administrative Code.

Plumbing Section Supervisor

Superintendent
Chairman Backflow Advisory Board

262

| | | | |
|--|--|--|--|
| 1 Wages, tips, other compensation 13964.64 | | 2 Federal income tax withheld 1506.00 | |
| 3 Social security wages 13964.64 | | 4 Social security tax withheld 865.81 | |
| 5 Medicare wages and tips 13964.64 | | 6 Medicare tax withheld 202.49 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 [REDACTED] | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| 14 Other | | 12b | |
| d Control number | | 13 Stat Emp Ret plan Third party | |
| e Employee's name BENJAMIN D LYNCH | | | |
| 15 State Employer's state ID number 1) OH 51-812977 | | 17 State income tax 1 1) 13964.64 2) 237.28 | |
| 18 Local wages, tips, etc. 1 | | 19 Local income tax 1 | |
| 2) [REDACTED] | | 20 Locality name | |
| Form W-2 Wage and Tax Statement Department of the Treasury -- Internal Revenue Service Copy B To Be Filed With Employee's FEDERAL Tax Return | | | |

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

OMB No. 1545-0008

| | | | | | |
|---|--|--|--|---|--|
| a Employee's social security number [REDACTED] | | 1 Wages, tips, other compensation \$20,493.32 | | 2 Federal income tax withheld \$2,122.00 | |
| b Employer identification number (EIN) [REDACTED] | | 3 Social security wages \$20,493.32 | | 4 Social security tax withheld \$1,270.59 | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE RD ROCK CREEK, OH 44084-9511 | | 5 Medicare wages and tips \$20,493.32 | | 6 Medicare tax withheld \$297.15 | |
| d Control number | | 7 Social security tips \$0.00 | | 8 Allocated tips \$0.00 | |
| e Employee's first name and initial BENJAMIN D. | | Last name LYNCH | | 9 | |
| [REDACTED] | | 11 Nonqualified plans \$0.00 | | 12a \$0.00 | |
| [REDACTED] | | 13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | 12b \$0.00 | |
| [REDACTED] | | 14 Other \$0.00 | | 12c \$0.00 | |
| [REDACTED] | | [REDACTED] | | 12d \$0.00 | |
| f Employee's address and ZIP code | | 15 State Employer's state ID number OH 51812977 | | 16 State wages, tips, etc. \$20,493.32 | |
| [REDACTED] | | 17 State income tax \$317.35 | | 18 Local wages, tips, etc. \$0.00 | |
| [REDACTED] | | 19 Local income tax \$0.00 | | 20 Locality name | |

Form W-2 Wage and Tax Statement
Copy C—For EMPLOYEE'S RECORDS

2016
Department of the Treasury—Internal Revenue Service

Safe, accurate,
FAST! Use



| | | | |
|---|---|--|----------------------------|
| 1 Wages, tips, other compensation 34066.63 | | 2 Federal income tax withheld 3094.00 | |
| 3 Social security wages 34066.63 | | 4 Social security tax withheld 2112.13 | |
| 5 Medicare wages and tips 34066.63 | | 6 Medicare tax withheld 493.97 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 Verification code | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| 14 Other | | 12b | |
| | | 12c | |
| | | 12d | |
| d Control number | | 13 Stat Emp Ret. plan Third party | |
| e Employee's name BENJAMIN D LYNCH [REDACTED] | | | |
| 15 State 1) OH | Employer's state ID number 51-812977 | 15 State 2) | Employer's state ID number |
| 16 State wages, tips, etc. 1) 34066.63 | | 17 State income tax 714.67 | |
| 18 Local wages, tips, etc. 1 1) 3845.34 | 19 Local income tax 57.68 | 20 Locality name GENEVOTLAK | |
| 2) 1563.89 | 2) 28.15 | ASHTABULA | |

Form W-2 Wage and Tax Statement
 Department of the Treasury - Internal Revenue Service
 To Be Filed With Employee's FEDERAL Tax Return
2017
 OMB No. 1545-0008

| | | | |
|---|---|--|----------------------------|
| 1 Wages, tips, other compensation 42122.48 | | 2 Federal income tax withheld 3535.62 | |
| 3 Social security wages 42122.48 | | 4 Social security tax withheld 2611.59 | |
| 5 Medicare wages and tips 42122.48 | | 6 Medicare tax withheld 610.78 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 Verification code | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| 14 Other | | 12b | |
| | | 12c | |
| | | 12d | |
| d Control number | | 13 Stat Emp Ret. plan Third party | |
| e Employee's name BENJAMIN D LYNCH [REDACTED] | | | |
| 15 State 1) OH | Employer's state ID number 51-812977 | 15 State 2) | Employer's state ID number |
| 16 State wages, tips, etc. 1) 42122.48 | | 17 State income tax 1018.56 | |
| 18 Local wages, tips, etc. 1 1) 283.34 | 19 Local income tax 4.25 | 20 Locality name GENEVOTLAKE | |
| 2) 1563.89 | 2) 28.15 | ASHTABULA | |

Form W-2 Wage and Tax Statement
 Department of the Treasury - Internal Revenue Service
 Copy C For Employee's Records
2018
 OMB No. 1545-0008

| | | | |
|---|---|--|----------------------------|
| 1 Wages, tips, other compensation 41606.02 | | 2 Federal income tax withheld 3077.45 | |
| 3 Social security wages 41606.02 | | 4 Social security tax withheld 2579.57 | |
| 5 Medicare wages and tips 41606.02 | | 6 Medicare tax withheld 603.29 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| | | 12b | |
| 14 Other | | 12c | |
| | | 12d | |
| d Control number | | 13 Stat Emp | Ret. plan Third party |
| e Employee's name BENJAMIN D LYNCH | | | |
| f [REDACTED] | | | |
| 15 State 1) OH | Employer's state ID number 51-812977 | 15 State 2) | Employer's state ID number |
| 16 State wages, tips, etc 1) 41606.02 | | 17 State income tax 1 974.41 | |
| 2) 16 Local wages, tips, etc 1 | | 19 Local income tax 1 | |
| 1) 3383.00 | | 67.66 PAINESVILLE | |
| 2) 4510.00 | | 67.66 GEN-JEDD1 | |

Form W-2 Wage and Tax Statement
 Department of the Treasury -- Internal Revenue Service
 To Be Filed With Employee's State
Copy 2 City or Local Income Tax Return **2021**
 OMB No. 1545-0008

| | | | |
|---|---|--|----------------------------|
| 1 Wages, tips, other compensation 44407.00 | | 2 Federal income tax withheld 3505.72 | |
| 3 Social security wages 44407.00 | | 4 Social security tax withheld 2753.23 | |
| 5 Medicare wages and tips 44407.00 | | 6 Medicare tax withheld 643.90 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| | | 12b | |
| 14 Other | | 12c | |
| | | 12d | |
| d Control number | | 13 Stat Emp | Ret. plan Third party |
| e Employee's name BENJAMIN D LYNCH | | | |
| f [REDACTED] | | | |
| 15 State 1) OH | Employer's state ID number 51-812977 | 15 State 2) | Employer's state ID number |
| 16 State wages, tips, etc 1) 44407.00 | | 17 State income tax 1 1091.67 | |
| 2) 18 Local wages, tips, etc 1 | | 19 Local income tax 1 | |
| 1) 836.00 | | 12.54 GEN-JEDD1 | |
| 2) | | | |

Form W-2 Wage and Tax Statement
 Department of the Treasury -- Internal Revenue Service
 To Be Filed With Employee's State
Copy 2 City or Local Income Tax Return **2020**
 OMB No. 1545-0008

| | | | |
|---|---|--|----------------------------|
| 1 Wages, tips, other compensation 40783.50 | | 2 Federal income tax withheld 3022.25 | |
| 3 Social security wages 40783.50 | | 4 Social security tax withheld 2528.58 | |
| 5 Medicare wages and tips 40783.50 | | 6 Medicare tax withheld 591.36 | |
| a Employee's social security no. [REDACTED] | | b Employer ID number (EIN) [REDACTED] | |
| c Employer's name, address, and ZIP code ROBERT E. ANCHOR PLUMBING, INC. 2443 MECHANICSVILLE ROAD ROCK CREEK, OH 44084-9511 | | | |
| 7 Social security tips | | 8 Allocated tips | |
| 9 | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a | |
| | | 12b | |
| 14 Other | | 12c | |
| | | 12d | |
| d Control number | | 13 Stat Emp | Ret. plan Third party |
| e Employee's name BENJAMIN D LYNCH | | | |
| f [REDACTED] | | | |
| 15 State 1) OH | Employer's state ID number 51-812977 | 15 State 2) | Employer's state ID number |
| 16 State wages, tips, etc 1) 40783.50 | | 17 State income tax 1 990.22 | |
| 2) 18 Local wages, tips, etc 1 | | 19 Local income tax 1 | |
| 1) 2603.00 | | 39.05 JEFFERSON | |
| 2) 3229.50 | | 58.13 ASHTABULA | |

Form W-2 Wage and Tax Statement
 Department of the Treasury -- Internal Revenue Service
 To Be Filed With Employee's State
Copy 2 City or Local Income Tax Return **2019**
 OMB No. 1545-0008

Gary W. Hall
439 W.41st Street
Ashtabula, OH 44004
440-645-6808
Gwhall48@live.com

October 28, 2022

To: Prospective Employers of Mr. Benjamin Lynch

My first experience with Mr. Lynch (Ben) was in the fall of 2016 when I was VP and Project Manager for Hughes-Roller Building Company and we had been awarded an 18,000 SF buildout for a new medical facility in Ashtabula, OH. There was extensive underground rough in and Ben's former employer was awarded the contract for the work. This project was fast tracked so there was no time for any delays. Ben got the work done on time and without difficulty. Worked well with the other trades and performed his work professionally. His determination and attitude were impressive.

Ben stayed positive and saw the job to completion and stayed on schedule. His employer became my plumbing contractor of choice and we continued to work together on a variety of other commercial, industrial projects up until I retired in late 2020. I also trusted them to work on my home without supervision. I never had any concerns about him working closely with our clients and he understood all the project documents and where to find the information he needed to do his job. He was always respectful to me and other contractors as well.

It is my belief that Ben will provide the same service and respect he showed me to everyone and in anything he does.

If you have questions, please contact me at 440-645-6808.

Respectfully,

Gary W. Hall, owner Ashtabula Construction Services, LLC

File Attachments for Item:

C-6 McGowan, Thomas - FPPE Trainee

Cert ID: 8455

Current Certifications: FPI

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan

Thomas

8455

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK TRAINEE CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|--|
| <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input checked="" type="checkbox"/> Fire Protection Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner |
| <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector | <input type="checkbox"/> Mechanical Inspector |
| <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | | | |

| | |
|---|--|
| <input type="checkbox"/> Res. Plans Examiner | <input type="checkbox"/> Res. Building Inspector |
| <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD (Mark "T" If Trainee)

| Description | | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|--------------------|---------------|
| Architectural Registration | | | | |
| P.E. Registration | | | | |
| Res | Non-Res | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | | |
| Building Plans Examiner Certification | | | | |
| Mechanical Plans Examiner Certification | | | | |
| Fire Protection Plans Examiner Certification | | | | |
| Electrical Plans Examiner Certification | | | | |
| Plumbing Plans Examiner Certification | | | | |
| Fire Protection Inspector Certification | | | 8455 | 11/23/2020 |
| Electrical Safety Inspector Certification | | | | |
| Plumbing Inspector Certification | | | | |
| Fire Safety Inspector Certification | | | | |
| Fire Protection System Designer Certification | | | | |
| Medical Gas Piping Inspector Certification | | | | |

Section 3: Employment/Education

| a. Formal Education | Date Graduated |
|---------------------|----------------|
| St. Edward H.S. | 6/1994 |
| | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan
Last Name

Thomas
First Name

8455
BBS Certification ID

| | |
|---|--------------------------|
| b. Related Vocational or Technical Training | Years' Experience |
| CFSI, FPI | 4 |
| c. U.S. Military construction experience (MOS or other designation): | Years' Experience |
| 13B 1P | 3 |
| d. Place of Employment: | Years' Employed |
| Cleveland Division of Fire | 22 |

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--|--|
| Cleveland | CFSI, FPI | Fire Inspector, Fire suppression and Alarm Inspector | 3 |

SECTION 5: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|---|
| <i>Example: Children's Hospital, Toledo Structural steel work on addition</i> | <i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i> | <i>July 2013-May 2014 (10 months)</i> |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan

Last Name

Thomas

First Name

8455

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|-------------------------------------|
| | | |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan

Thomas

8455

Last Name

First Name

BBS Certification ID

SECTION 6: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

If you answered "Yes" please explain below:

Yes No

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

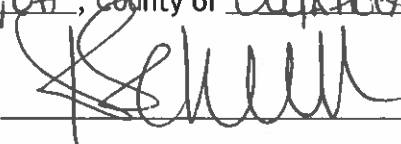
| |
|--|
| |
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| |
| |
| |
| |
| |
| |
| |

SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: 

Subscribed and duly sworn before me according to law, by the above named applicant this day Zaira of May in the year 2022 at Cleveland, OH, county of Cuyahoga and State of OHIO.

Notary Public: 



DORI SCHELL
Notary Public, State of Ohio
My Commission Expires
June 22, 2022

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan

Last Name

Thomas

First Name

8455

BBS Certification ID

**BUILDING OFFICIAL CERTIFICATION OF
TRAINEE AND SUPERVISOR**

Please complete this certification and return it with the BBS Application for Trainee Certification

Application for participation in a BBS Trainee program is being made to the Board of Building Standards. I, Thomas Vanover, Building Official for the political subdivision of Cleveland, OH (Municipality, Township, County) do hereby acknowledge that the applicant, Thomas McGowan, and the assigned supervisor, James Oleksiak are full-time employees of the above mentioned political subdivision.

Signature: 

Date: 6-6-22

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

McGowan
Last Name

Thomas
First Name

8455
BBS Certification ID

SUPERVISOR CERTIFICATION OF TRAINEE

Please complete this certification and return it with the BBS Application for Trainee Certification.

Application for participation in a BBS trainee program is being made to the Board of Building Standards. I, James Oleksiak, trainee supervisor for the political subdivision of Cleveland, OH, (Municipality, Township, County) hold certification as a FPPE, Certification ID# 5656, effective until 12/31/2024, and hereby consent and agree to supervise the work of Thomas McGowan (Applicant) as a Building Department Trainee pursuant to section 4101:7-3-01(F)(5)(b) of the Ohio Administrative Code.

Number of Trainees presently supervised (including this applicant):

 One Two

Signature:  Date: 5/23/22



Department of Commerce

Division of Industrial Compliance
Mike DeWine, Governor
Sheryl Maxfield, Director

Thomas McGowan

Personnel ID #: 8455

11/23/2020

At its meeting on 11/20/2020, the Board of Building Standards approved your interim certification as indicated on the enclosed certification ID card below.

The expiration date(s) for your interim certification(s) is (are) as indicated below on the ID card.

You must complete the conditions of your interim certification during the interim certification period stated on your ID card. The specific examination and Ohio Building Code Academy, if applicable, requirements are summarized in the attached form and can also be found in Ohio Administrative Code Chapter 4101:1-1-01 for commercial certifications and Ohio Administrative Code Chapter 4101:8-1-01 for residential certifications.

Please refer to your personnel I.D. number (shown on the ID card below) on any correspondence and on all certificates of continuing education forwarded to the Board's office related to your certification. If you have any questions, please contact the Board for assistance at 614-644-2613.

Sincerely,
BOARD OF BUILDING STANDARDS

Regina S. Hanshaw
Executive Secretary

| | |
|--|---|
| <p>Personnel ID #: 8455 Fire Protection Inspector-Int 11/30/2022</p> | <p>Mike DeWine GOVERNOR</p>  <p>Timothy Galvin CHAIRMAN</p> <p>BOARD OF BUILDING STANDARDS This is to certify that Thomas McGowan has met the requirements of the OAC and is hereby certified as indicated.</p> <p> Executive Secretary</p> |
|--|---|

Ohio Board of Building Standards
6606 Tussing Road
PO Box 4009
Reynoldsburg, OH 43068-9009 U.S.A.

Timothy Galvin, Chairman

An Equal Opportunity Employer and Service Provider

614 | 644 2613
Fax 614 | 644 3147
TTY/TDD 800 | 750 0750
www.com.ohio.gov

File Attachments for Item:

C-7 Spruill Jr, James C - FPPE

Cert ID: 2227

Current Certifications: BO, BI, BPE, RBO

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SPRUILL JR.
Last Name

JAMES C
First Name

2227
BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|--|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input checked="" type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|--------------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Building Official Certification | 2227 5/10/2017 |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | 2227 12/21/1998 |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | 2227 | 2018 |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

SPRUILL JR.
Last Name

JAMES C
First Name

2227
BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|---|-------------------|
| Formal Education | Date Graduated |
| | |
| Related Vocational or Technical Training | Years' Experience |
| LOCAL 200 CARPENTER'S UNION JOURNEYMAN CARPENTER | 6 |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| U.S. NAVY CONSTRUCTION BATTALION | 5 YEARS |
| Place of Employment: | Years' Employed |
| | |
| | |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|--------------------------------|--|--|
| CITY OF COLUMBUS | BUILDING INSPECTOR | INSPECTION OF OB BUILDINGS PER OHIO BUILDING CODE AND RESIDENTIAL CODE OF OHIO, INSPECTION OF FIRE ALARM AND FIRE SUPPRESSION | 11/1/1998 |
| " | BUILDING INSPECTION SUPERVISOR | SUPERVISE BUILDING INSPECTORS, STAND IN AS BUILDING OFFICIAL, BBS APPROVED TRAINING PROVIDER | 7/17/2016 |

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To_ (MM/YY) |
|---|--|-----------------------------------|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Last Name

First Name

BBS Certification ID

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|---|-------------------------------------|
| | | |
| Total Experience on This Page (In Months): | | |

Last Name

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

- 1. Have you ever been convicted of any felony, or any crime involving moral turpitude? Yes No

If you answered "Yes" please explain below:

- 2. Have you served in the U.S. armed services? (If No, skip question 3) Yes No
- 3. If YES, were you discharged under honorable conditions? Yes No

If you answered "No" please explain below:

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: _____

[Handwritten Signature]

Subscribed and duly sworn before me according to law, by the above named applicant this day 1 of November in the year 2022 at 2:04 pm, County of Franklin and State of Ohio

Notary Public: _____

[Handwritten Signature]



ANTIONETTE GILLUM
Notary Public, State of Ohio
My Commission Expires June 17, 2024

File Attachments for Item:

C-8 Thompson, Arlington - MechPE

Cert ID: 6251

Current Certifications: MI, RMI

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Thompson
Last Name

Adington
First Name

6251
BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|---|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input checked="" type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|-------------------------------------|------------------------------------|-------------------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Mechanical Inspector Certification | 12-26-2019 1-25-2020 |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

HVAC Contractor license (in escrow) 46323

June 2019

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Thompson
Last Name

Arlington
First Name

6251
BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|--|-----------------------|
| Formal Education | Date Graduated |
| <u>Westland High School</u> | <u>1990-June</u> |
| Related Vocational or Technical Training | Years' Experience |
| <u>Fairfield Career center - HVAC School</u> | <u>1 yr schooling</u> |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| Place of Employment: | Years' Employed |
| <u>City of Columbus - dept Building & Zoning</u> <u>111 N. Front St. 614-645-3044</u> | <u>3 yrs</u> |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|---|--|--|---|
| <u>City of Columbus</u> <u>dept Building</u> <u>& Zoning.</u> | <u>Residential &</u> <u>Commercial</u> <u>mechanical</u> <u>Inspector</u> | <u>Inspect GAS & mechanical</u> <u>Systems in Residential &</u> <u>Commercial Building per</u> <u>mechanical & GAS codes.</u> <u>Check installations to be</u> <u>installed per approved plans.</u> | <u>Oct 19, 2019</u> <u>to</u> <u>present.</u> |

Thompson
Last Name

Arlington
First Name

6251
BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|-------------------------------------|
| Example: Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Parkview multi-family Building 34 W. Poplar Ave Col Ohio HVAC, Refrigeration, ductwork installation | Metro Air 4731 Northwest park way Hilliard OH 43026 614-977-1237 | Oct 2004 - April 2004 6 months |
| East Bank 5735 New Bank Circle Dublin OH - multi-family HVAC, Refrigeration, ductwork installation | Metro Air 4731 Northwest park way Hilliard OH 43026 | April 2004 - June 2005 14 months |
| Arlington Crossing condo multi-family 3155 Tremont Rd Upper Arlington Ohio HVAC, Refrigeration, ductwork installation | Metro Air 4731 Northwest park way Hilliard OH 43026 | June 2005 - Dec 2006 - 18 months |
| Total Experience on This Page (In Months): | | 3 yrs 6 mo - 33 months |

Thompson
Last Name

Arlington
First Name

6251
BBS Certification ID

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From To (MM/YY) |
|---|---|--|
| 466 polaris parkway shell Building HVAC, Refrigeration, ductwork installation | metro Air 4731 Northwest parkway Hilliard OH 43026 614-777-1237 | JAN 2006 - June 2006 6 months |
| EAST BANK II 5745 New bank circle dublin ohio 43017 HVAC, Refrigeration ductwork installation | metro Air 4731 northwest parkway Hilliard OH 43026 614-777-1237 | JUNE 2006 - Oct 2007 14 months |
| Stephany Spalmer cancer center - Shell Building 1145 clontarf River rd. HVAC, Refrigeration, ductwork installation. | metro Air 4731 Northwest parkway Hilliard OH 43026 614-777-1237 | OCT 2007 - Oct 2008 - 1-yr |
| Hickory Chase Hilliard 4522 Hickory Chase Way HVAC, Refrigeration or ductwork | metro Air 4731 Northwest parkway 614-777-1237 | OCT 2008 - June - 2008 - 9 months |
| 915 clontarf River rd shell Building HVAC ductwork | metro Air 4731 Northwest parkway 614-777-1237 | June 2008 - June 2009 - 12 months |
| 1015 clontarf River rd shell Building Col OH HVAC shell Building ductwork | metro Air 4731 Northwest parkway 614-777-1237 Hilliard OH | June 2009 - June 2010 - 12 months |
| Mid ohio weatherization program - Installation of Furnaces, hot water tanks, chimney liners, ductwork | MOAPC 111 liberty st Col OH suite 100 43215 | June 2010 - sept 2015 5-yr 3 months |
| Ohio State university maintenance dept HVAC installation + maintenance for CAMPUS Buildings. | Ohio State Facilities + development 1500 Central Services Building 2003 millikin rd Col OH 43210 614-292-0257 | SEPT 2015 - Dec 2016 - 15 months |
| City of columbus Public utilities - maintenance dept HVAC installation + maintenance | 910 dublin rd, Col OH 43215 1-614-645-8276 | Dec 2016 - Oct 2019 2 yrs + 10 months |
| Total Experience on This Page (In Months): | | 16yrs - 192 months |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Thompson
Last Name

Arlington
First Name

6251
BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions? Yes

No

If you answered "No" please explain below:

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SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the process. I understand that providing false information into the system may result in my removal from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: *[Signature]*

Subscribed and duly sworn before me according to law, by the above named applicant this day 24 of October in the year 2022 at 3:15 pm, County of Franklin and State of Ohio.

Notary Public: *[Signature]*



ANTIONETTE GILLUM
Notary Public, State of Ohio
My Commission Expires June 17, 2024



INTERNATIONAL CODE COUNCIL ARLINGTON THOMPSON

The International Code Council attests that the individual named on this certificate has satisfactorily demonstrated knowledge as required by the International Code Council by successfully completing the prescribed written examination based on codes and standards then in effect, and is hereby issued this certification as:

Mechanical Plans Examiner

Given this day October 1, 2022

Handwritten signature of Michael P. Wich in black ink.

**Michael Wich, CBO
President, Board of Directors**

Certificate No. 9488067

Handwritten signature of Dominic Sims in black ink.

**Dominic Sims, CBO
Chief Executive Officer**



This certificate is the property of ICC and must be returned to ICC in the event of suspension or revocation of the certificate.

File Attachments for Item:

C-9 Woidke, John - FPPE Trainee

Cert ID: 6041

Current Certification: FPI

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke

John

6041

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK TRAINEE CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|--|
| <input type="checkbox"/> Master Plans Examiner | <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input checked="" type="checkbox"/> Fire Protection Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner |
| <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector | <input type="checkbox"/> Mechanical Inspector |
| <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | | | |

| | |
|---|--|
| <input type="checkbox"/> Res. Plans Examiner | <input type="checkbox"/> Res. Building Inspector |
| <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|--------------------|---------------|
| Architectural Registration | | | | |
| P.E. Registration | | | | |
| Res | Non-Res | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | | |
| Building Plans Examiner Certification | | | | |
| Mechanical Plans Examiner Certification | | | | |
| Fire Protection Plans Examiner Certification | | | | |
| Electrical Plans Examiner Certification | | | | |
| Plumbing Plans Examiner Certification | | | | |
| Fire Protection Inspector Certification | | | 6041 | 6/18/20 |
| Electrical Safety Inspector Certification | | | | |
| Plumbing Inspector Certification | | | | |
| Fire Safety Inspector Certification | | | | |
| Fire Protection System Designer Certification | | | | |
| Medical Gas Piping Inspector Certification | | | | |

Section 3: Employment/Education

| a. Formal Education | Date Graduated |
|----------------------------|----------------|
| Cleveland State University | 6/1999 |
| | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke

John

6041

Last Name

First Name

BBS Certification ID

| | |
|--|-------------------|
| b. Related Vocational or Technical Training | Years' Experience |
| | |
| | |
| c. U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| | |
| d. Place of Employment: | Years' Employed |
| City of Cleveland | 20 |

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--|--|
| City of Cleveland | Fire Protection Insp | Witness acceptance test and verify installation against approved plans | 5yrs |

SECTION 5: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|---|
| <i>Example:</i> <i>Children's Hospital, Toledo</i> <i>Structural steel work on addition</i> | <i>Homer Steel and Trade</i> <i>125 Anytown Street</i> <i>My City, OH, 45454</i> <i>(419)555-1212</i> | <i>July 2013-May 2014</i> <i>(10 months)</i> |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke

John

6041

Last Name

First Name

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|----------------------------------|
| Working as a Cleveland Firefighter for 20 plus years. Certified Fire Safety Inspector for 5 plus years and Fire Protection Inspector since 2020. | City of Cleveland 1645 Superior Cleveland Oh 44114 | 20 plus years |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke

John

6041

Last Name

First Name

BBS Certification ID

SECTION 6: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

If you answered "Yes" please explain below:

Yes No

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

| |
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SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: John Woidke

Subscribed and duly sworn before me according to law, by the above named applicant this day 24th of May in the year 2022 at CLEVELAND, County of CUYAHOGA and State of OHIO.

Notary Public: [Signature]



Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke
Last Name

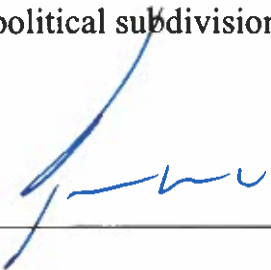
John
First Name

6041
BBS Certification ID

**BUILDING OFFICIAL CERTIFICATION OF
TRAINEE AND SUPERVISOR**

Please complete this certification and return it with the BBS Application for Trainee Certification

Application for participation in a BBS Trainee program is being made to the Board of Building Standards. I, THOMAS VANOVER, Building Official for the political subdivision of Cleveland, OH (Municipality, Township, County) do hereby acknowledge that the applicant, JOHN WOIDKE, and the assigned supervisor, JAMES OLEKSIK are full-time employees of the above mentioned political subdivision.

Signature: 

Date: 6-6-22

Board of Building Standards

Application for Trainee Certification, Building Department Personnel

Woidke
Last Name

John
First Name

6041
BBS Certification ID

SUPERVISOR CERTIFICATION OF TRAINEE

Please complete this certification and return it with the BBS Application for Trainee Certification.

Application for participation in a BBS trainee program is being made to the Board of Building Standards. I, JAMES OLEKSIK, trainee supervisor for the political subdivision of CLEVELAND, OH, (Municipality, Township, County) hold certification as a FPPE, Certification ID# 5656, effective until 12/31/2024, and hereby consent and agree to supervise the work of John Woidke (Applicant) as a Building Department Trainee pursuant to section 4101:7-3-01(F)(5)(b) of the Ohio Administrative Code.

Number of Trainees presently supervised (including this applicant):

 One

 ✓ Two

Signature:  Date: 5/24/22

File Attachments for Item:

C-10 Brigner, Randy - RBI

Cert ID: 8971

Current Certifications: None

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Brigner
Last Name

Randy
First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | |
|---|---|---|
| <input type="checkbox"/> Res. Building Official | <input type="checkbox"/> Res. Plans Examiner | <input checked="" type="checkbox"/> Res. Building Inspector |
| | <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD (Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Section 3: Employment/Education

| | |
|---|--------------------------|
| a. Formal Education | Date Graduated |
| <u>Alliquippa High School - AutoCAD</u> | <u>2004</u> |
| b. Related Vocational or Technical Training | Years' Experience |
| <u>ITT Technical Institute - Drafting</u> | <u>1</u> |
| c. U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| d. Place of Employment: | Years' Employed |
| <u>Carson Farms Apartments</u> | <u>1</u> |

Brogner
Last Name

Randy
First Name

BBS Certification ID

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

SECTION 5: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You must demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|-----------------------------------|
| <i>Example:</i> Children's Hospital, Toledo Structural steel work on addition | Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212 | July 2013-May 2014 (10 months) |
| Whole Foods Easton Caulking control joints in brick and parapits | Self Employed | 03/15 - 04/15 |
| Subway Sunbury - Caulk Control joints in EIFS and CUU. | Spal Tech 5717 Bromley Ave Worthington, OH 43085 614-436-1872 | 04/12 - 05/15 |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Brigner

Randy

Last Name

First Name

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|---|----------------------------------|
| The Woods at Polaris Installed hot water tanks and overseen installation of 3 windows and a sliding glass door | The Woods at Polaris 865 Glenmore Way Westerville, OH 43082 614-568-4312 | 05/14 - 09/16 |
| Easton Commons Installed Rooftop Condensers with heat pumps and replaced Evaporator coils. | Easton Commons 4011 Easton Way Columbus, OH 43219 614 428 0036 | 09/16 - 07/17 |
| Aliquippa High School Auto-CAD Classes. | Aliquippa High School 100 Harding Ave Aliquippa, PA 15001 7248577515 | 2003 - 2004 |
| ITT Tech Drafting Classes | ITT Tech 5460 Cambells Run Road Pittsburgh, PA 15205 412-446-2900 | 2004 - 2005 |
| Total Experience on This Page (In Months): | | |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Brigner
Last Name

Randy
First Name

BBS Certification ID

SECTION 6: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

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SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Randy Brigner

Subscribed and duly sworn before me according to law, by the above named applicant this day 14 of Oct in the year 2022 at 3:00 PM, County of Delaware and State of OH.

Notary Public: Nicholas Ray Queen

SEAL



Nicholas Ray Queen
Notary Public, State of Ohio
My Commission Expires 10-02-27

File Attachments for Item:

C-11 Flynn, Scott - BI

Cert ID: 8895

Current Certifications: RBI

Last Name

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | | | |
|--|--|--|--|---|
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Master Plans Examiner | <input checked="" type="checkbox"/> Building Inspector | <input type="checkbox"/> Electrical Safety Inspector | <input type="checkbox"/> Fire Protection Inspector |
| <input type="checkbox"/> Building Plans Examiner | <input type="checkbox"/> Plumbing Plans Examiner | <input type="checkbox"/> Mechanical Plans Examiner | <input type="checkbox"/> Electrical Plans Examiner | <input type="checkbox"/> Fire Protection Plans Examiner |
| | <input type="checkbox"/> Plumbing Inspector | <input type="checkbox"/> Mechanical Inspector | <input type="checkbox"/> Non-Residential Industrial Unit Inspector | |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD

(Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Last Name

First Name

BBS Certification ID

SECTION 3: EMPLOYMENT/EDUCATION

| | |
|--|----------------------|
| Formal Education | Date Graduated |
| Bachelor of Science in Construction Management | May 1999 |
| Related Vocational or Technical Training | Years' Experience |
| U.S. Military construction experience (MOS or other designation): | Years' Experience |
| Place of Employment: | Years' Employed |
| Hamilton County Planning + Development previously Fischer Homes | 4 months 20 years |

SECTION 4: APPLICANTS REQUESTING MEDICAL GAS INSPECTOR CERTIFICATION

Attach proof of certification by an ASSE recognized third-party certifier in accordance with ASSE standard 6020.

SECTION 5: OBC BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|----------------------|--|
| Hamilton Cty | Building Inspector | Building Inspections | 7/21/22 4 months |

Last Name

First Name

BBS Certification ID

SECTION 6: ELECTRICAL SAFETY INSPECTOR (ESI) - SPECIFIC EXPERIENCE QUALIFICATIONS

Applicants for Electrical Safety Inspector Only Must Complete This Item

Section 3783 of the Ohio Revised Code specifies that an applicant for a Certificate of Competency as an Electrical Safety Inspector must meet one of the following to qualify to take required examination. Please check the qualification that applies:

1. Have been a journeyman electrician or equivalent for four years, two of which were as an electrician foreman, and have had two years' experience as a building department electrical inspector trainee;
2. Have been a journeyman electrician or equivalent for four years and have had three years' experience as a building department electrical inspector trainee;
3. Have had for four years' experience as a building department electrical inspector trainee;
4. Have been a journeyman electrician or equivalent for six years;
5. Am a graduate electrical engineer and registered in the State of Ohio. Registration number: _____
6. Applicant authorizes all testing organizations including ICC to provide test results to the BBS.

SECTION 7: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

SECTION 7 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|---|---|
| <i>Example: Children's Hospital, Toledo Structural steel work on addition</i> | <i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i> | <i>July 2013-May 2014 (10-months)</i> |
| <i>Kissel Park Condominiums Camp Joy Glenway TriHealth Cincinnati Airport Baldwin Building many residential homes</i> | <i>Day Precision Wall 513-353-2999 concrete foundation contractor employed 1993 to 1999</i> | <i>4/93 - 6/94 10/94 - 3/95 4/95 - 7/95 6/96 - 8/96 2/97 - 7/97 7/97 - 5/99</i> |
| Total Experience on This Page (In Months): | <i>72 months</i> | |

Last Name

First Name

BBS Certification ID

| List Each Construction Project AND Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From _ To _ (MM/YY) |
|---|--|-----------------------------------|
| residential estimator and plan reviewer | The Fischer Group Erlanger KY | 4/00 to 4/12 120 months |
| multi-family estimator and plan reviewer | 859-344-5989 Jim Haas employed 4/2000 - 3/2020 | 4/12 to 8/16 52 months |
| Builder / Superintendent - built approx 50 homes + (2) 12 unit condo buildings over 8 communities in 2 separate counties | | 8/16 to 3/20 54 months |
| Review commercial drawings + generate material estimates and bid proposals | Williams Design Drywall and Paint Bill Johns | 10/20 to 11/22 25 months |
| Wright Pat AFB Montgomery Quarter Salam Lofts - Crestview Hills Concert Suites - Jeffersonville IN Blue Ash Senior Living Dr Klaffer office remodel Bank of America - Middletown Bank of America - Hyde Park Columbus Ave townhomes Bigelow Ave apartments Austin Common apartments Ovation Flats condos Michigan Ave apartments Veridian apartments - Delhi Innovation Drive - Middletown T50W apartments Hotel Oakley | | |
| many residential homes | Total Experience on This Page (In Months): | 251 months |

Last Name

First Name

BBS Certification ID

SECTION 8: PERSONAL HISTORY

1. Have you ever been convicted of any felony, or any crime involving moral turpitude?

Yes No

If you answered "Yes" please explain below:

2. Have you served in the U.S. armed services? (If No, skip question 3)

Yes No

3. If YES, were you discharged under honorable conditions?

Yes No

If you answered "No" please explain below:

Empty table with 10 rows for providing an explanation.

SECTION 9: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: Scott Flynn

Subscribed and duly sworn before me according to law, by the above named applicant this day 11 of NOVEMBER in the year 2022 at CLEVELAND, County of HAMILTON and State of OHIO.

Notary Public: Carissa Ferris



File Attachments for Item:

C-12 Thomas, William - RBO

Cert ID: 8972

Current Certifications: None

Board of Building Standards
Thomas

Last Name

Application for Interim Certification, Building Department Personnel

William , C

First Name

BBS Certification ID

SECTION 1: CHECK INTERIM CERTIFICATION(S) BEING REQUESTED

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Res. Building Official | <input type="checkbox"/> Res. Plans Examiner | <input type="checkbox"/> Res. Building Inspector |
| | <input type="checkbox"/> Res. Industrial Unit Inspector | <input type="checkbox"/> Res. Mechanical Inspector |

SECTION 2: LIST ANY OHIO LICENSE, CERTIFICATE, OR REGISTRATION HELD
 (Mark "T" If Trainee)

| Description | | Certificate Number | Date Received |
|---|--------------------------|------------------------------------|---------------|
| Architectural Registration | | | |
| P.E. Registration | | | |
| Res | Non-Res | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Official Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Plans Examiner Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Inspector Certification | |
| <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Inspector Certification | |
| Building Plans Examiner Certification | | | |
| Mechanical Plans Examiner Certification | | | |
| Fire Protection Plans Examiner Certification | | | |
| Electrical Plans Examiner Certification | | | |
| Plumbing Plans Examiner Certification | | | |
| Fire Protection Inspector Certification | | | |
| Electrical Safety Inspector Certification | | | |
| Plumbing Inspector Certification | | | |
| Fire Safety Inspector Certification | | | |
| Fire Protection System Designer Certification | | | |
| Medical Gas Piping Inspector Certification | | | |

Section 3: Employment/Education

| | |
|---|--------------------------|
| a. Formal Education | Date Graduated |
| High School | 6-1989 |
| b. Related Vocational or Technical Training | Years' Experience |
| Union apprentice grauate | 3 |
| c. U.S. Military construction experience (MOS or other designation): | Years' Experience |
| | |
| d. Place of Employment: | Years' Employed |
| Union employee with various contractors. | 14 |

Thomas

William,c

Last Name

First Name

BBS Certification ID

SECTION 4: OBC/RCO BUILDING INSPECTION EXPERIENCE PERFORMED FOR A BBS CERTIFIED BUILDING DEPARTMENT

| BBS Certified Building Department | BBS Certified Position/Title | Duties | Date of Service, Length of Time (MM/DD/YY) |
|-----------------------------------|------------------------------|--------|--|
| | | | |

SECTION 5: EXPERIENCE (DO NOT SUBSTITUTE WITH OTHER RESUMES).

Refer to Experience Requirements Listed in O.A.C. 4101:7-3-01 and O.R.C. 3783

Below, list the specific projects you worked on, and the specific work you performed, your typical duties for each project, and dates of this work. You **must** demonstrate that you have the required number of months (years) of actual, practical experience for the certification requested (see matrix).

Provide letters from certified inspectors, employers, or contractors verifying your experience. Submit copies of any certificates, diplomas, or licenses. Remove all personal information.

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|--|--|---|
| <p><i>Example:</i> Children's Hospital, Toledo Structural steel work on addition</p> | <p><i>Homer Steel and Trade 125 Anytown Street My City, OH, 45454 (419)555-1212</i></p> | <p><i>July 2013-May 2014 (10 months)</i></p> |
| <p>Total Experience on This Page (In Months):</p> | | |

Last Name

William,c

First Name

BBS Certification ID

SECTION 5 CONT.: EXPERIENCE

| List Each Construction Project <u>AND</u> Specific Type of Work Performed | Name of Employer, Contact, Address, Telephone Number | Project Time: From_ To _ (MM/YY) |
|---|--|--|
| <p>1) Worked throughout cuyahoga and surrounding counties as a drywall finisher and painter. Able to perform all drywall tasks hanging through sanding. Able to paint, including spraying. Also served as a forman on many jobs, scheduling, budgets, ordering and working with other contractors.</p> <p>2) Worked as a contractor ,sometimes as general contractor. Remodeling anything from kitchens and bathrooms to basement refinishing. Did carpentry, light plumbing,electrical, ceramic tile, laminets, and some hardwood floors. As needed, small concrete repairs and exterior decks.</p> | <p>Apex int. Competitive. International interiors. Westpoint int. Csi Int.</p> | <p>1994-2008</p> <p>2008- Present.</p> |
| Total Experience on This Page (In Months): | | 336 |

Board of Building Standards

Application for Interim Certification, Building Department Personnel

Thomas

William,c

Last Name

First Name

BBS Certification ID

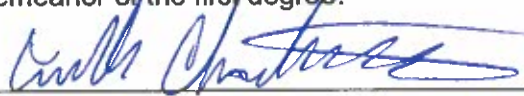
SECTION 6: PERSONAL HISTORY

- 1. Have you ever been convicted of any felony, or any crime involving moral turpitude? Yes No
- 2. If you answered "Yes" please explain below:
- 3. Have you served in the U.S. armed services? (If No, skip question 3) Yes No
- 4. If YES, were you discharged under honorable conditions? Yes No
If you answered "No" please explain below:

| |
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| |

SECTION 7: CERTIFICATION

I certify the information contained in this application is true and complete, and I understand that providing false information may be grounds for not granting certification or for immediate termination of certification at any point in the future, if granted. I authorize the investigation of all statements contained herein and release all parties from all liability for any damage that may result from furnishing the same to Ohio Board of Building Standards. Falsification is a violation of section 2921.13 of the Ohio Revised Code and is punishable as a misdemeanor of the first degree.

Signature of Applicant: 

Subscribed and duly sworn before me according to law, by the above named applicant this day 2 of November in the year 2022 at Cuyahoga PWC, County of Cuyahoga and State of Ohio.

Notary Public: 



JUSTIN BUDZINSKI
Notary Public, State of Ohio
My Comm. Expires 08/25/2024
Recorded in Lorain County