

City of Fairlawn Zoning, Housing & Residential Building Department

Residential Deck Safety Inspection Application

Applicant/Homeowner Information

Project Address _____ Date _____

Property Owner _____ Phone _____

Property Owner Address (if different than above) _____

The undersigned applicant/homeowner hereby requests the Building Department staff of the City of Fairlawn to conduct a Deck Safety Inspection at the Project Address listed above. In making this request, applicant/homeowner hereby grants permission to the City's Building Department staff to enter onto the subject real property for the purpose of inspecting the structural integrity of the deck thereon including railings, steps, joists, posts and foundation for any observable hazards and/or deterioration. Upon completion of the inspection the City's staff will provide the applicant/homeowner a written report outlining the condition of the deck and any areas in need of attention and/or repair. The applicant/homeowner understands that the City will not repair nor contract for the repair of any deficiencies found to be present and that any repair work found to be necessary is the responsibility of the applicant/homeowner. Applicant/homeowner realizes that if the condition of the deck is discovered to be an immediate serious health and/or safety hazard, the City's staff may condemn the structure until all necessary repairs have been made. In certain cases, a building permit application and fee may be required.

The applicant/homeowner understands that although the City's Building Department staff will be on applicant/homeowner's real property for the purpose of conducting a Deck Safety Inspection as outlined above, the Building Department staff may observe conditions in the surrounding area and in plain view which may be a health and safety hazard to the applicant/homeowner, their family and guests. If any hazardous or unsafe conditions exist, as a service to the applicant/homeowner, the City's staff may issue a separate report or order directing the applicant/homeowner to correct the hazardous condition.

Applicant Signature _____ Date _____

Print Applicant Name _____ Phone _____

Email Address _____ Fax _____
(If you wish to be contacted by email)

3487 S. Smith Rd. · Fairlawn, OH 44333 · 330-668-9500 / (Fax) 330-668-9546
Email: bldg_zoning@ci.fairlawn.oh.us