Violet Township Administrative Offices
12970 Rustic Drive
Pickerington, Ohio 43147

Wall Elevation Certification

Date________________ Contact Name and Phone Number ________________________________

Builder___________________________________ Violet Township DESC Permit Number___________________

Property Address_______________________________________________________________________________

Subdivision (Section/Phase) __________________________ Lot Number_____________

I hereby certify that:

• The WALL elevations shown are the result of an actual survey (attached) performed on ________________, 20_____. These elevations are consistent with the approved building and engineering plans and will allow for construction of the house to be consistent with the approved First Floor Elevation of Finished Grade Elevations.

• Elevation readings were taken from and based on original footer elevations:
  Check only one:  ___ Top of wall – poured
                    ___ Top of wall – block

• Estimated elevation taken from a minimum of one reading per foot section
  Average Elevation _________________________________

• Multi-level or step plans shall include a schematic of building footprint with reading locations and elevations identified

  A COPY OF THE APPROVED BUILDING AND WALL SECTION PLAN MUST ACCOMPANY THIS FORM IDENTIFYING ELEVATION READING LOCATIONS AND THE ACTUAL ELEVATION TAKEN.

Signed ______________________________________________________________________

Print ______________________________________________ Date ___________________

Professional Surveyor

Fax or Return to: Violet Township Office
                   12970 Rustic Drive
                   Pickerington, Ohio  43147
                   Phone (614) 575-5556
                   Fax (614) 575-5562

Office Use Only

_____ Approved  _____ Disapproved   Reviewer: ____________-

Comments: ___________________________________________________________________