



CITY OF EUCLID

HOUSING DEPARTMENT

585 EAST 222ND STREET

EUCLID, OH 44123

BUILDINGANDHOUSING@CITYOFEUCLID.GOV

Section 1759.04(a) of the Euclid Codified Ordinances provides:

No person, agent, firm or corporation shall convey, sell by land contract or otherwise, any interest in any dwelling, building or structure as defined in Section 1751.04, without furnishing the grantee or buyer, prior to such conveyance or sale, a current Certificate of Inspection indicating the unit or units are free of all violations of the Building and Housing Code of the City of Euclid.

POINT OF SALE CERTIFICATE OF INSPECTION FEE SCHEDULE

SINGLE FAMILY HOME	\$225.00
HOMESTEAD EXEMPT HOME	\$100.00
DUPLEX – SINGLE PARCEL	\$260.00
MULTIPLE UNIT DWELLING (Four or more units)	\$225.00 + \$35.00 PER SUITE
RELOCATING IN EUCLID	REFUND OF POINT OF SALE FEE



CITY OF EUCLID
HOUSING DEPARTMENT
POINT OF SALE APPLICATION

PLEASE FILL IN ALL SECTIONS OF THIS POINT OF SALE APPLICATION BY
PRINTING LEGIBLY. INCOMPLETE AND MISSING INFORMATION WILL DELAY PROCESSING.

I give consent for an interior and exterior inspection ☐ I give consent for an exterior inspection only ☐

If the inspection results in a concrete violation, the affected concrete will be marked with a small dot of washable paint

Property Address: _____ PP# _____

Number of Dwelling Units: _____ Lock Box Code: _____

Dwelling is currently: _____ Owner Occupied _____ Vacant _____ Tenant Occupied

Current Property Owner: _____

If Corporation/LLC, provide the Statutory agent as identified with the Ohio Secretary of State:

Address of Owner/Corporation: _____

City/State/Zip: _____

Phone #: _____ Cell #: _____

Email: _____

All communication will be handled via email.

Legal Agent, Real Estate or Managing Company

Name: _____

Relationship to Owner: _____

Address: _____

City/State/Zip: _____

Phone #: _____ Cell #: _____

Email: _____

By signing, I declare that this application is true, correct, and complete.

Signature: _____

Printed Name _____ Date: _____