



North Eastern Ohio Fire Prevention Association

CODE CHANGE PROPOSAL

Name:		Date:	
Jurisdiction/Company:			
Address:			
City:		State:	Zip Code:
Phone:	Ext.:	Fax:	
E-mail Address:			

Code Section: _____ (OFC, IFC, OBC) (Note: If the proposal is for a new section, indicate "new")

Code Name: _____ (Do not use acronyms)

Revise as follows:

Reason:

Cost Impact:

Return form to: Mike Dunton via email to duntonma@cityofcf.com or fax (330) 971-8409