CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL & REMODELING

DATE 8-16-11 JOB LOCATION 579 Appian +	Ave.
OWNER Tom Norden	TELEPHONE # <u>4/9-592-/38</u> 5
OWNER ADDRESS 579 Appian Ave. Napole	
CONTRACTOR StB Construction	CELL PHONE # 4/9-966-1201
DESCRIPTION OF WORK TO BE PERFORMED Roof & Sporting	
ESTIMATED COMPLETION DATE Fall 2011 ESTIMATED	TED COST 15,706 99
Affected Floor Area (AFA): In existing structures, it is the area affected by the improvement, i.e. a new wall dividing a room (the AFA would be only the room and not all the rooms).	
DESCRIPTION Address of the Control o	FEE TOTAL COST
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+ \$25.00 = \$
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 = \$
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+ \$25.00 = \$
Siding and/or Roofing	\$25.00 \$
Windows/Doors Decks	\$25.00 \$
	\$25.00 \$
Garage and Shed over 200 SF (Detached) Electrical Service Upgrade	\$25.00 \$
Water Heater	\$25.00 \$
Furnace and/or AC Replacement	\$25.00 \$
ruinace and/or AC Repiacement	\$25.00 \$
MBP (100.3100.46510)	Subtotal: \$
(100.0000.42700) PLUS Ohio Board of Building Standards	s Fee + 1% s
	TOTAL FEE: \$
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON BUILDING/ZONING DEPARTMENT.	
I hereby certify that I am the Owner of the named property, or that the proposed work is authorized by the Owner of record and that I have been authorized by the Owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for Work described in this application is issued, I certify that the code afficial or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.	
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.	
SIGNATURE OF APPLICANT: Report Schilled DA	TE: 8-16-11
PRINT NAME:	
BATCH # 24926 CHECK # 3655 p.	ATE 8-16-11
P-KH-11-0117	