need to and \$ 5.25

## CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 3-19-19 JOB LOCATION 220 EBARNE	3			1	
OWNER JEAN CONNOLLY	TELEPHONE #				
OWNER ADDRESS 220 EBARNES					
CONTRACTOR EZUNG P+H	_CF	ELL PHON	E#		
DESCRIPTION OF WORK TO BE PERFORMED REPLACE FU	RN	MCE			
ESTIMATED COMPLETION DATE ESTIMAT.	ED (	COST			
Affected Floor Area (AFA): In existing structures, it is the area affected by the improv AFA would be only the room and not all the rooms).	emen		wa	_	(the
DESCRIPTION		FEE		TOTAL COST	•
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+	\$25.00 =			
Electrical Circuit in (AFA) × 53.00/Circuit = 5	+	\$25.00 =			ē.
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+	\$25.00 =			6
Siding and/or Roofing	-	\$25.00	_\$		
Windows/Doors		\$25.00	\$		<u> </u>
Decks		\$25.00	\$		
Garage and Shed over 250 SF (Detached)	_	\$25.00	- \$		27
Electrical Service Upgrade		\$25.00	\$		
Water Heater		\$25.00	\$	0= 0	
Furnace and/or AC Replacement		\$25.00	\$	25.00	
MBP (100.3100.46510)		Subtotal:	5		
(100.0000.42700) TUUS Ohio Board of Building Standards F	ce	+ 1%	S	.25	
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECT.		AL FEE:	\$ (1004)	25,25	52
ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHA PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON BUILDING I hereby corify that I om the Owner of the nemod property, or the proposed work is enthorized by the Owner of record and I	ULL BI G/ZON hai / hi	E UNDERTAKI UNG DEPARTI eve bosu sushorb	HEN D	R PERFORMED UNTIL T. 1 the Owner to make this	
application as hister authorized again and Lagras to conform to all applicable laws of the Jurisdiction. In addition, if a permit if the code official or the code afficially authorized representation that I have the authority in enter areas covered by such permit at applicable to such permit.	or Wes any rea	rk dascribed in th asonable hour to	enfor is app	plication is based, I certify res the provisions of the cod	that delt)
HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LIST	ED IN	ISTRUCTION	is.		
SIGNATURE OF APPLICANT: DATE:					
RINTNAME				8	
BATCH # 20155 CHECK / 131 38 DATE		2-201	1		

## CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 3-19-1	M JOB LOCATION 220 E BARNES							
OWNER	AN CONNOLL	Υ	TELEPHONE #					
OWNER ADDRESS	220 EBA	RNES						
CONTRACTOR	EZLING F	7++	CELI	PHONE #				
DESCRIPTION OF	WORK TO BE PERFORM							
ESTIMATED COMI	PLETION DATE	ES	TIMATED COS	ST				
Affected Floor Area ( AFA would be only the DESCRIPTION	AFA): In existing atructures, croom and not all the rooms).	it is the area affected by the	-	.c. a new wa	Il dividing a room (the			
	tions Square foot in (AFA)	x \$0.05 = \$		25.00 = \$				
Electrical	Circults in (AFA)	> \$3.00/Circuit = \$		25.00 = \$				
Plumbing	Traps in (AFA)	x \$3.00/Trap = \$		25.00 - 5				
	Nag			25.00 \$				
Windows/Doors				25.00 \$				
Decks				25.00 \$				
	over 250 SF (Detached)			25.00 · S				
	Upgrade			25.00 \$	-			
Water Heater				25.00 \$				
Furnace and/or A	C Replacement			25.00 \$	25.00			
		MBP (100,3100.46510)	Sul	btotali \$				
	(100.0000,47700) ILUS O	ldo Board of Building Stan	dards Fee +	1% s	-25			
			TOTAL	FFF: *	25,25			
PERMIT APPLIED FOR HERE	f no excavation, constructio ing structure, sign, or part t in has been approved and issu of given nemod property, or the the proper	Hereof and no use of the a Ed by the city of napoleon	n, electrica <b>l or</b> Boye shall b <b>e u</b> n Building/zoning	MECHANICA DERTAKÉN O DEPARTMEN	R PERFORMED UNTIL THE L.			
application at blafter puthorised el	your and I agree to conform to all applicable amount of the land the same that the land the	It laws of the Jurisdiction. In addition.	I's seruit for Work dis	क्षा के में के बार	alication is itsued, I certify that			
I HEREBY ACKNOWLED	ETHAT I HAVE REKE AND FU	LLY UNDERSTAND THE ABO	VE LISTED INSTR	RUCTIONS.				
SIGNATURE OF APPLICANT	r .		DATÉ:					
PRINT NAME:	•							
BATCH #	CHEC	K /	DATE	100				
	The second secon							