PKH-11-01

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 10-24-11 JOB LOCATION 614 Beckham St.	Napoleon
	TELEPHONE # 419-599-8768
OWNER ADDRESS 614 Beckham St.	
CONTRACTOR COC Home Repair	_CELL PHONE #_ 419-579-0888
DESCRIPTION OF WORK TO BE PERFORMED Replace Futry	
ESTIMATED COMPLETION DATE 10-25-// ESTIMAT	ED COST 500,00
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	FEE TOTAL COST
BUILDING:	FEE TOTAL COST
Decks	\$25.00 \$
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+ \$25.00 = \$
Garage and Shed over 200 SF (Detached)	\$25.00 \$
Siding and/or Roofing	\$25.00 \$
Windows/Doors	\$25.00 \$
ELECTRICAL:	
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 = \$
Electrical Service Upgrade	\$25.00 \$
MECHANICAL:	
Water Heater	\$25.00 \$
Furnace and/or AC Replacement	\$25.00 \$
PLUMBING:	Ψ20.00
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+ \$25.00 = \$
TOTAL plus Ohio Board of Building Standards Fee 1% \$	
	TOTAL PRE-
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 applicable to such permit.	
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.	
SIGNATURE OF APPLICANT: Millar Comp DATE	10 215 11
PRINT NAME:	
PERMIT # P-KH-11-0189 BATCH # CHECK # 3694	DATE 10-24-11