Print Date: 07/19/2017



City of Napoleon Building Department

255 W. Riverview P.O. Box 151 Napoleon, OH 43545

Phone: (419) 592-4010 Fax: (419) 599-8393

Email:

Outside Sewer

Permit Number:

P-17-0277

Expiration Date:

07/19/2018

Ms. Sandra Shumaker

655 Buckeye

Napoleon, OH 43545

Description:

\$0.00 Sewer Outside

0.00 Sewer Outside x \$0.0000

Building Permit Info

Project Description: Construction Value: Replace Sanitary Sewer

\$1,000.00

Mack 43- Sugars

Authorizing Signature

CITY OF NAPOLEON ZONING PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL DEMOLITIONS, FENCES, POOLS, SHEDS,

DRIVEWAYS, SIDEWALKS & SEWERS

(655)

JORI OCATION (756)

DATE 7-18-17 JOB LOCATION TOBS BUCKEYE LOVE				
OWNER				
OWNER ADDRESS				
CONTRACTOR Tressler	Plumbing LLC CH	ELL PHON	E# 419-576-03	_ 02
	GEORMED Santany sewory		med	_
ESTIMATED COMPLETION DATE	ION DATE ESTIMATED COST			
DESCRIPTION		FEE	TOTAL COST	_
Demo Permit	(100.3100.46690)	\$100.00	\$	
Fence		\$25.00	\$	
Pool		\$25.00	\$	
Garage and Shed Under 200 SF (Deta	ached)	\$25.00	\$)
Driveway		0	\$	1
Sidewalk/Curbing		0	\$	1
Sewer Outside		0	\$ 0	\hookrightarrow
	Subtotal		\$ ()	7
			\$	\rightarrow
	ТО	TAL FEE:	\$ 0	
ACTEMATION OF ANY DUILDING STRUCTURE, SIGN.	ISTRUCTION OR STRUCTURAL ALTERATION, ELECTRICA OR PART THEREOF AND NO USE OF THE ABOVE SHALL D AND ISSUED BY THE CITY OF NAPOLEON BUILDING/ZO	HERE II INCHESTRUMENTO A 20	TEN OR REDEONATE TO THE	E
I hereby certify that I am the Owner of the named property, or the application as his/her authorized agent and I agree to conform to	hat the proposed work is authorized by the Owner of record and that I to all applicable laws of the jurisdiction. In addition, if a permit for W shall have the authority to enter areas covered by such permit at any	have been author	ized by the Owner to make this	
I HEREBY ACKNOWLEDGE THAT LHAVE REA	D AND FULLY UNDERSTAND THE ABOVE LISTED	INSTRUCTIO	NS.	
SIGNATURE OF APPLICANT! DATE:				
PRINT NAME:				
BATCH#	CHECK# DATE			

