CITY OF NAPOLEON ZONING PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTAL DEMOLITIONS, FENCES, POOLS, SHEDS, DRIVEWAYS, SIDEWALKS & SEWERS

DATE 5-7-12 JOB LOCATION	lain mont	- 17	ik
OWNER Hall	TELEPHONE #		
OWNER ADDRESS			
CONTRACTOR CSC	CELL PHONE # 419-438-7468		
DESCRIPTION OF WORK TO BE PERFORMED			
ESTIMATED COMPLETION DATE	ESTIMATED COST		
DESCRIPTION		re e	TOTAL COST
Demo Permit	(100.3100.46690)	FEE \$100.00	* TOTAL COST
Fence	(100.3100.46690)	\$25.00	\$
Pool	(100.3100.46690)	\$25.00	\$
Garage and Shed Under 200 SF (Detached)	(100.3100.46690)	\$25.00	\$
Driveway		0	\$
Sidewalk/Curbing		0	\$
Sewer Outside		0	\$
	Subtotal:		\$
			\$
	TO	TAL FEE:	s ()
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO I PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY O	JSE OF THE ABOVE SHALL I	RE IINDERTAK	EN OR PERFORMED HATH THE
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 official 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 UNDERSTA	ND THE ABOVE LISTED	INSTRUCTIO	NS.
SIGNATURE OF APPLICANT: Sur Salver DATE: 5-7-12			
PRINT NAME:			
PERMIT # BATCH # CH	ECK#	DATE	