84-293653

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

Thought, amount to a miner	
DATE 1/6/17 JOB LOCATION 820 Clair	nont Avenue Napole on
OWNER Amy Cramer	TELEPHONE #
OWNER ADDRESS 220 Clair mont Ave A	apoleon, OH 43545
CONTRACTOR Shio Bath Solutions dha Bath Fr.	tte CELL PHONE # 717-932-2500
DESCRIPTION OF WORK TO BE PERFORMED ACCYLIC WO	all and fixture
installation,	
ESTIMATED CONTLETION DATE	IATED COST \$ 7, 406.00
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:	
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:	2
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:	2006
Plumbing Traps in (AFA) x \$3.00/Trap = \$	00 + \$25.00 = \$ 2-8.00
TOTAL plus Ohio Board of Building Standards Fee 1% \$ 28	
	TOTAL FEE: \$ 28,28
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 DEPOMIT 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 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 of record and that I have been 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 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 application as his/her authorized agent and I agree to conform to all application application as his/her authorized agent and I agree to conform to all application application as his/her authorized agent and I agree to conform to all application application. In addition, if a permit for Work described in this application is issued, I certify that application as his/her authorized agent and I agree to conform to all application application. In addition, if a permit for Work described in this application is issued, I certify that application appli	
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABO	OVE LISTED INSTRUCTIONS.
SIGNATURE OF APPLICANT: James Claul	DATE: 1/6/1/
PRINT NAME:	
BATCH# 3600 CHECK# 8022\	DATE \\16/17



To Whom It May Concern:

Please fax a copy of the approved plumbing permit to (419) 861-3711 as soon as possible.

Thank you,

Bridget Eardly Branch Administrator

Office 84-Holland

Ph: (419) 861-3715 Fax: (419) 861-3711