

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Building Permit

Permit Number: BP2009-17

Page 1 of 1

Printed: 3/30/2009

ADDRESS:

935 Clairmont Ave.

Applicant

Name: Tri-County Roofing
Address: 13883 Co Rd 162

Approval Date: 3/30/2009
419-399-3964

Owners

Name: Dawn Heitman
Address: 935 Clairmont Ave.
Napoleon, OH 43545

Phone: 419-592-1784

Contractors

Contractor Type: **Builder**

Name: Tri-County Roofing
Address: 13883 Co Rd 162

Paulding, OH 45879

Phone: 419-399-3964

Fees and Receipts:

Number	Description	Amount
FEE2009-193	Reroofing/Siding/Gutters (Auto	\$20.00
FEE2009-194	State 1% fee (Calc)	\$0.20
	Total Fees:	\$20.20
RCPT2009-169		\$20.20
	Total Receipts:	\$20.20

roof

APPLICANTS SIGNATURE: _____ DATE: _____

REMINDER: YOU MUST CALL (419)592-4010 FOR AN INSPECTION

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

CK # 6768
03-23-09

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS, & REMODELING. *Batch 20397*

DATE: 3/19/09 JOB LOCATION: 935 CLAIRMONT AVE

OWNER: Dawn HEITMAN PHONE: 419-592-1794

OWNER ADDRESS: R-429 RD 12 CITY: NAPOLEON ZIP: 43545

CONTRACTOR: TRI County ROOFING INC

PHONE #: 419-399-3864 CELL PHONE# _____

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO:

Is any of the above job going to be subcontracted out? Yes No:

If yes to whom: _____

DESCRIPTION OF WORK TO BE PERFORMED: See Attached

ESTIMATED COMPLETION DATE: 3/27/09

PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- | | |
|--|---|
| <input type="checkbox"/> A/C ADD ON 1% | <input type="checkbox"/> REMODELING 1% |
| <input type="checkbox"/> BOILER REPLACEMENT 1% | <input checked="" type="checkbox"/> ROOFING 1% |
| <input type="checkbox"/> CURBING | <input type="checkbox"/> SEWER REPAIRS** |
| <input type="checkbox"/> DECKS * 1% | <input type="checkbox"/> SIDEWALK* |
| <input type="checkbox"/> DRIVEWAY* | <input type="checkbox"/> SIDING 1% |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE 1% | <input type="checkbox"/> SHED* (under 200 sq ft) |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW 1% | <input type="checkbox"/> SHED* (over 200 sqft) 1% |
| <input type="checkbox"/> SWIMMING POOL* 1% | <input type="checkbox"/> FENCE* |
| <input type="checkbox"/> FURNACE REPLACEMENT 1% | <input type="checkbox"/> TEMP ELECTRIC 1% |
| <input type="checkbox"/> ADDITIONS* 1% | <input type="checkbox"/> FURNACE NEW 1% |
| <input type="checkbox"/> WATER TAP (size _____") | <input type="checkbox"/> WINDOWS /DOORS 1% |
| <input type="checkbox"/> LAWN METER 1% | |
| <input type="checkbox"/> PLUMBING 1% | |

1%- EFFECTIVE JUNE 1, 2007 BOARD OF BUILDING STANDARDS FEE

*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

** IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE.

OFFICE USE ONLY

PERMIT# _____

DUE: \$ _____

PERMIT COST WORKSHEET

1%

JOB _____ **BASE FEE** **TOTAL + BBS FEE = PERMIT TOTAL**

SIDING (only) TOTAL SQ _____ X 1.00 = _____ + \$5.00 = \$ _____ + \$ _____ = \$ _____			
ROOFING (only) TOTAL SQ <u>15</u> X 1.00 = <u>15</u> + \$5.00 = \$ <u>20</u> + \$ <u>.20</u> = \$ <u>20.20</u>			
WINDOWS / DOORS(only) # _____ X 1.00 = _____ + \$5.00 = \$ _____ + \$ _____ = \$ _____			
ELECTRICAL # OF CIRCUITS _____ X 3.00 = _____ + \$15.00 = \$ _____ + \$ _____ = \$ _____			
ELECTRICAL SERVICE UPGRADE	\$15.00 = \$ _____ + \$ _____ = \$ _____		
PLUMBING (INSIDE) replacing/ repairs	\$10.00 = \$ _____ + \$ _____ = \$ _____		
SEWER (OUTSIDE)	\$25.00 = _____	\$ N/A	= \$ _____
WATER HEATER	\$5.00 = \$ _____ + \$ _____ = \$ _____		
SHED UNDER 200 SQ FT (over 200 see chart)	\$ 5.00 = _____	\$ N/A	= \$ _____
FURNACE OR A/C (REPLACEMNT)	\$ 5.00 = \$ _____ + \$ _____ = \$ _____		
DEMOLITION (only)	\$30.00	N/A	\$ _____
SIDEWALK REPLACEMENT/ NEW	\$25.00	N/A	\$ _____
DRIVEWAY	\$25.00	N/A	\$ _____

ALL CONSTRUCTION, ALTERATIONS, REMODELING, SHEDS, DECKS, & FENCES NOT LISTED ABOVE IS BASED ON COST OF WORK BEING PERFORMED.D.

PERMIT FEE

COST OF WORK \$ _____ (SEE CHART) \$ _____ + \$ _____ = \$ _____

0.00	-	250.00	0.00	11,000.00	-	11,999.00	25.00
250.00	-	999.00	10.00	12,000.00	-	12,999.00	26.00
1,000.00	-	1,999.00	12.00	13,000.00	-	13,999.00	27.00
2,000.00	-	2,999.00	14.00	14,000.00	-	14,999.00	28.00
3,000.00	-	3,999.00	16.00	15,000.00	-	15,999.00	29.00
4,000.00	-	4,999.00	18.00	16,000.00	-	16,999.00	30.00
5,000.00	-	5,999.00	19.00	17,000.00	-	17,999.00	31.00
6,000.00	-	6,999.00	20.00	18,000.00	-	18,999.00	32.00
7,000.00	-	7,999.00	21.00	19,000.00	-	19,999.00	33.00
8,000.00	-	8,999.00	22.00	20,000.00	-	20,999.00	34.00
9,000.00	-	9,999.00	23.00	21,000.00	-	21,999.00	35.00
10,000.00	-	10,999.00	24.00	22,000.00	-	22,999.00	36.00
				Over 22,999		Please Call	

** OTHER FEES NOT LISTED MAY APPLY

TOTAL PERMIT COSTS \$ 20.20



Tri-County Roofing, Inc.

visit us at www.782roof.com
13883 Rd 162 Paulding OH 45879
419-399-3964 419-782-ROOF 419-599-3964 419-238-7666
Fax 419-399-9662



Job Number: 09061
Name: Dawn Heitman
Phone: 419-592-1794
Alt. Phone: 419-438-1528 - Cell

Mailing Address:
R-429 Rd 12
Napoleon, OH 43545

Job Address:
935 Clairmont Ave
Napoleon, OH 43545

JOB DESCRIPTION: House Roof

***Remove all shingles. Inspect the roof decking for warpage, water damage, and proper spacing. Install new 7/16" O.S.B. sheathing at \$ 1.25 per sq. ft. if needed. Install additional nails where necessary to secure the decking. Install 30# roofing underlayment, wide Quality drip edge, new Arfco pipe vent flashings, and 4 Lomanco 750 slant back roof vents.**

***Install CertainTeed 30yr dimensional shingles.**

***Remove existing metal chimney and install new Class-B vent pipe.**

30 yr. Price _____

Class-B Price _____

Total Price _____

Shingle Color: Choice
Drip Edge Color: White

This estimate includes all materials, labor, dump fees, permits, taxes, cleanup and disposal of all debris caused by said work. We will use a magnetic roller over the yard for nails, staples, etc. Any additional materials over and above quoted items will be billed at time and material.

PAYMENT: Our normal payment terms are 50% upon the acceptance of the job and the balance due day of completion. Any other payment terms must be approved by management. A 1.37% interest charge per month (15.6% APR) will be added to outstanding balances upon completion of work. Your warranty information if applicable, will be sent to you in the mail. We also enclose a customer survey with the receipt. We really appreciate any comments you may have so that we may continue to serve our customers to the best of our ability.

Your signature is an acceptance of this proposal and its terms. This proposal expires in 10 days unless otherwise indicated.

Estimator: Bill Voirol

Date: 3/17/2009

Accepted by: _____

