

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL & REMODELING **BP2010-84/PL2010-15**

DATE 9-27-10 JOB LOCATION 1220 Dodd Napoleon
 OWNER Ken + Elaine Williams TELEPHONE # 419-748-8387
 OWNER ADDRESS 7006 Co Rd W McClure Ohio
 CONTRACTOR Self CELL PHONE # 419-654-2831
 DESCRIPTION OF WORK TO BE PERFORMED install siding, remodel Bathroom
 ESTIMATED COMPLETION DATE _____ ESTIMATED COST 7,000-

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
<i>Addition & Alterations</i> Square foot in (AFA) x \$0.05 = \$	+ \$25.00 = \$	\$ 25 ⁰⁰
<i>Electrical</i> Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 = \$	\$
<i>Plumbing</i> Traps in (AFA) x \$3.00/Trap = \$	+ \$25.00 = \$	\$ 25 ⁰⁰
Siding and/or Roofing	\$25.00	\$
Windows/Doors	\$25.00	\$
Decks	\$25.00	\$
Garage and Shed over 200 SF (Detached)	\$25.00	\$
Electrical Service Upgrade	\$25.00	\$
Water Heater	\$25.00	\$
Furnace and/or AC Replacement	\$25.00	\$
MBP (100.3100.46510)	Subtotal:	\$ 50 ⁰⁰
(100.0000.42700) PLUS Ohio Board of Building Standards Fee + 1%		\$.50
TOTAL FEE:		\$ 50⁵⁰

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 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 UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

SIGNATURE OF APPLICANT: Elaine Williams DATE: 9-27-10

PRINT NAME: _____

BATCH # 23231 CHECK # 101 DATE _____

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Building Permit

Permit Number: BP2010-84

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Printed: 9/30/2010

ADDRESS:

1220 Dodd St.

Applicant

Name: Ken & Elaine Williams

Address: L-006 Co. Rd. 2

Approval Date:

Owners

Name: Ken & Elaine Williams

Address: L-006 Co. Rd. 2

McClure, OH 43534

Contractors

Fees and Receipts:

Number	Description	Amount
FEE2010-449	Building	\$25.00
FEE2010-450	State 1% fee (Calc)	\$0.25
Total Fees:		\$25.25
RCPT2010-281		\$25.25
Total Receipts:		\$25.25

remodel bathroom

APPLICANTS SIGNATURE: _____ **DATE:** _____

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

remodel bathroom