



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-17-0276
 Expiration Date: 07/19/2018

Mr. Ken Like
 65 Duquesne

Napoleon, OH 43545

Description:

\$0.00	Sewer Outside	0.00 Sewer Outside x \$0.0000
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Building Permit Info

Project Description:	Replace Sanitary Sewer
Construction Value:	\$1,000.00

Mark B. Spiess

 Authorizing Signature

7-19-17

 Date

CITY OF NAPOLEON ZONING PERMIT APPLICATION

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

DATE 7-18-17 JOB LOCATION 65 Duquesne Prue

OWNER Ken like TELEPHONE # _____

OWNER ADDRESS _____

CONTRACTOR Tressler Plumbing LLC CELL PHONE # 419-576-0302

DESCRIPTION OF WORK TO BE PERFORMED Sanitary Sewer Replacement

ESTIMATED COMPLETION DATE _____ ESTIMATED COST 1500.00

DESCRIPTION	FEE	TOTAL COST
Demo Permit	(100.3100.46690) \$100.00	\$
Fence	\$25.00	\$
Pool	\$25.00	\$
Garage and Shed Under 200 SF (Detached)	\$25.00	\$
Driveway	0	\$
Sidewalk/Curbing	0	\$
Sewer Outside	0	\$ 0
	Subtotal:	\$
		\$
	TOTAL FEE:	\$ 0

P-17-0276

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: [Signature] DATE: _____

PRINT NAME: _____

BATCH # _____ CHECK # _____ DATE _____

65 DUQUESNE DRIVE
SANITARY SEWER TAP

DATE: 8-9-17

INSTALLED BY: TILLESIER PLUMBING

INSPECTED BY: MARCY CROSSLAND

