CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

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M. S.	Pho
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DATE 12-13 JOB LOCATION 3 42 Gualin	AUE.
OWNER LYNN WACHTMANN	TELEPHONE # <u>4/9 - 599</u> - 98
OWNER ADDRESS 550 EUCLID AVE	
CONTRACTOR HERSHBERGER CONST	CELL PHONE # 419-9.66- 3
	Rebuild
ESTIMATED COMPLETION DATE/2.31-13 ES	STIMATED COST B, DOD. 03
Affected Floor Area (AFA): In existing structures, it is the area affected by the improved only the room and not all the rooms).	vement, i.e. a new wall dividing a room (the AFA would be
DESCRIPTION	FEE TOTAL COST
BUILDING:	101AL COST
Decks	\$25.00 \$
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+ \$25.00 = \$
Garage and Shed over 200 SF (Detached)	\$25.00 \$ 250
Siding and/or Roofing	\$25.00 \$
Windows/Doors	\$25.00 \$
ELECTRICAL:	
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 = \$
Electrical Service Upgrade	\$25.00 \$
MECHANICAL:	Ψ
Water Heater	\$25.00 \$
Furnace and/or AC Replacement	\$25.00 \$
PLUMBING:	\$25.00 B
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+ \$25.00 = \$
TOTAL plus Ohio Board of Build	diver Standards Ess 18/ a 7+
Design of Design	ding Standards Fee 1% \$
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE APPROVED AND ISSUED BY THE CITY OF NAPOLE OF	ON; ELECTRICAL OR MECHANICAL INSTALLATION OR ABOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE
PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEOI I hereby certify that I am the Owner of the named property, or that the proposed work is authorized by the Owner of application as histher authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition the code official or the code official's authorized representative shall have the authority to enter areas covered by supplicable to such permit.	frecord and that I have been authorized by the Owner to make this
HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABO	
SIGNATURE OF APPLICANT: / ful Hungary	DATE: /Z-/-/3
PRINT NAME: CHAO HERSHBERGER	()
BATCH# CHECK#	DATE
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