THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT 255 W. RIVERVIEW (419) 592-4010

Zor	ning Permit			Page 1 of 1		
Permit Number: ZP2009-29				Printed: 9/29/2009		
ADI	DRESS:	1018	8 Fairview Di	r		
Applicant Name: Address	Marvin Drumn : 930 E. Rivervi			al Date : 5/27/2009 '9-0243		
Owners						
Name: Address:	Mr. Marvin Dru 930 E. Rivervie		Phone: 419-579-0243			
	Napoleon, OH	43545				
Contractor	'S					
Fees and	Receipts:					
Numb	er	Description		Amount		
			Total Fees:	\$0.00		
			Total Receipts:	\$0.00		
Shed						
APPLICANTS SIGNATURE:			DATE:_			
APPLICANTS	DIGITALI OLD					

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE \$5-27-09 JOB LOCATION 1018	Fairview	Dair	ve			
OWNER Marvin Drummand	Ti			7-02		
OWNER ADDRESS 930 E. Riverui	·eW					
CONTRACTOR	E#419-579	7-02				
DESCRIPTION OF WORK TO BE PERFORMED						
ESTIMATED COMPLETION DATE ESTIMATED COST						
DESCRIPTION		FIZE	TOTAL COST			
Demo Permit	(100.3100.46690)	\$100.00	\$	-		
Fence			\$	-		
Garage and Shed Under 200 SF (Detached)			s O	-		
Driveway			\$	=======================================		
Sidewalk/Curbing			\$			
Sewer Outside			\$	_		
	Subtotal:		\$			
			\$	-		
	\$	9				
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCT ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE C	TURAL ALTERATION, ELECTRICA ONO USE OF THE ABOVE SHALL I ITY OF NAPOLEON BUILDING/ZO	L OR MECHA BE UNDERTAK NING DEPART	NICAL INSTALLATION OF EN OR PERFORMED UNT	R IL THE		
I hereby certify that I am the Owner of the named property, or that the proposed work is author application as his/her authorized agent and I agree to conform to all applicable laws of the just the code official or the code official's authorized representative shall have the authority to entapplicable to such permit.	rized by the Owner of record and that I	have been author	ized by the Owner to make this	ify that code(s)		
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDER	STAND THE ABOVE LISTED I	NSTRUCTIO	NS.			
SIGNATURE OF APPLICANT	DATE:	5-27-	-09			
PRINT NAME: Moroin - rumana						
BATCH# CHECK#	DATE					