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## THE CITY OF NAPOLEON

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

Sidwealk	/Curb Replacement Permit	P	age 1 of 1
Permit Nu	mber: SW2009-9	P	rinted: 9/4/2009
ADDRESS: 1035		Fairview	
Applicant Name: Cor	crete Specialist	Approval Date: 9/4/	2009
Address: 5-9	-	419-599-8881	
Owners			
	Snyder		
Address: 1035	Fairview		
Nap	oleon, OH 43545		
Contractors			
Contractor Type:	Masonary/Concrete		
Name: Concrete Specialist		Napoleon, O	H 43545
Address:	5-943 St Rt 110	Phone: 419	9-599-8881
Fees and Recei	pts:		
Number	Description		Amount
		Total Fees:	\$0.00
		Total Receipts:	\$0.00
Curb Replacen	nent		
APPLICANTS SIGNATURE:		DATE:	
M		(419)592-4010 FOR AN INSPECTION	



## · CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 8-20-69 JOB LOCATION	035 Fudruica					
OWNER_ Bill SNYDEK						
OWNER ADDRESS 1035 FA	IRVIEW					
CONTRACTOR Concrete Specialist Co CELL PHONE # 438-7468						
DESCRIPTION OF WORK TO BE PERFORMED	Curb Replacement					
ESTIMATED COMPLETION DATE 8 -26	8-69 ESTIMATED COST 1200					
DESCRIPTION	FEE TOTAL COST					
Demo Permit	(100.3100.46690) \$100.00 \$					
Fence	\$					
Garage and Shed Under 200 SF (Detached)	\$					
Driveway	\$					
Sidewalk/Curbing	\$					
Sewer Outside	\$					
	Subtotal: \$					
	\$					
- "	TOTAL FEE: \$ -					
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART TH PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUEI	OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR EREOF AND NO USE OF THE ABOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE DBY THE CITY OF NAPOLEON BUILDING/ZONING DEPARTMENT.					
I hereby certify that I am the Owner of the named property, or that the proposed application as his/her authorized agent and I agree to conform to all applicable	work is authorized by the Owner of record and that I have been authorized by the Owner to make this laws of the jurisdiction. In addition, if a permit for Work described in this application is issued, I certify that uthority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s)					
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FUL	LY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.					
SIGNATURE OF APPLICANT:	DATE: 8-20-09					
PRINT NAME: Hugh B So	high					
BATCH# CHECK	# DATE					

		) (H)

## THE CITY OF NAPOLEON BUILDING & ZONING DEPARTMENT 255 W. RIVERVIEW (419)592-4010



**Inspections** 

Address: 1035 Fairview

Napoleon, OH 43545

**Applicant:** Concrete Specialist

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Printed: 9/4/2009

**Inspection Date:** 

9/4/2009

INSP2009-112

Inspection Type:

**Inspection Number:** 

Sidewalk

Inspector: Marty Crossland

Status: Complete

Permit Number: SW2009-9

Passed? ✓

Required Steps:

Comments:

Other Fields: