CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 8-15-13 JOB LOCATION 975 KENILWORTH		
	TELEPHONE	# 419-597-1415
OWNER ADDRESS 975 KONILWORM		
CONTRACTOR PRO CRAFT HOME PRODUCTS	CELL PHONE	
DESCRIPTION OF WORK TO BE PERFORMED ADMOVE & REAL	RACE APPRIX	22 SU SHINGLES
ESTIMATED COMPLETION DATE 6.20-13 ESTI	MATED COST //	244.00
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
BUILDING:		
Decks	\$25.00	\$
Addition & Alterations Square foot in (AFA)x \$0.05 = \$	+ \$25.00 =	\$
Garage and Shed over 200 SF (Detached)	\$25.00	\$
Siding and/or Roofing	\$25.00	\$ 25,00
Windows/Doors	\$25.00	\$
ELECTRICAL:		
Electrical Circuits in (AFA)x \$3.00/Circuit = \$	+ \$25.00 =	\$
Electrical Service Upgrade	\$25.00	\$
MECHANICAL:		
Water Heater	\$25.00	\$
Furnace and/or AC Replacement	\$25.00	\$
PLUMBING:		
Plumbing Traps in (AFA)x \$3.00/Trap = \$	+ \$25.00 =	\$
TOTAL plus Ohio Board of Buildin	ng Standards Fee 1%	5 .50
	TOTAL FEE:	s 25.50
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: Leleh Maish W	DATE: 8-15-13	
PRINT NAME: VIKINI MARSHALL		
PERMIT # BATCH # CHECK # 1762 DATE DATE		