## CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE JOB LOCATION 2410 KOLDE S	7
7.14.211	TELEPHONE # 41 > - > 66 - 777
OWNER ADDRESS 737 W. Washing Ton ST Man	TELEPHONE # 9/7-766-777
CONTRACTOR Mike Williams	Can 0910 43545
DESCRIPTION OF WORK TO BE PERFORMED Move EL-CT	CELL PHONE #_ <u>417-437-2905</u>
The house	Service Coming Into
ESTIMATED COMPLETION DATE ESTIMATI	ED COST
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	
BUILDING:	FEE TOTAL COST
Decks	#35.00 a
Addition & Alterations Square foot in (AFA) $x $0.05 = $$	\$25.00 \$
Garage and Shed over 200 SF (Detached)	+ \$25.00 = \$
Siding and/or Roofing	\$25.00 \$
Windows/Doors	\$25.00 \$
ELECTRICAL:	\$25.00 \$
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	#05.00
Electrical Service Upgrade	+ \$25.00 = \$
MECHANICAL:	\$25.00 \$ 25.00
Water Heater	•••
Furnace and/or AC Replacement	\$25.00 \$
PLUMBING:	\$25.00 \$
<b>Plumbing</b> Traps in (AFA) $x $3.00/Trap = $$	\$25.00 = \$
TOTAL plus Ohio Board of Building Standards Fee 1% \$	
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I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTR ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHAI PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON BUILDING/I hereby certify that I am the Owner of the named property, or that the propending to the control of the state of the st	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 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)	
1 HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.	
SIGNATURE OF APPLICANT: JULY DATE:	8-14-2015
PRINT NAME: / Tret Wells	
BATCH # 32 H9 CHECK # COSA DATE 9	3 14 15