CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 3/30/1/ JOE	LOCATION 2	12 1/01/	10			
OWNER OF ROTTIFF						
011	Q 1/2-1/2	2	TE	LEPHONE	C#	
OWNER ADDRESS 4	D KOIDE					
CONTRACTOR	n West	ohven	CE	LL PHONE	# 966 2094	
DESCRIPTION OF WORK TO BE PERFORMED						
		,				
ESTIMATED COMPLETION	1 . ,		ESTIMATED C	71	3000,00	
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 Squ	are 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:						
Electrical Circu	its in (AFA) x 5	\$3.00/Circuit = \$_	+	\$25.00=	\$	
Electrical Service Upgrade				\$25.00	\$	
MECHANICAL:						
Water Heater				\$25.00	\$	
Furnace and/or AC Replac	ement			\$25.00	\$	
PLUMBING:						
Plumbing Tra	ps in (AFA) x	\$3.00/Trap = \$	+	\$25.00 =	\$	
TOTAL plus Ohio Board of Building Standards Fee 1% \$						
I FILL A SANATA			TOT	TAL FEE:	\$	
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:	MIL		DATE:	3/30	211	
PRINT NAME: JOSh Saputo						
PERMIT # P- KH- 11-0131	ватсн# 2	1999 снес	ck# Cash	DATE 8	-30-11	