CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 6-14-16 JOB LOCATION	LENNE AUC
OWNER DEB ROLCS	
OWNER ADDRESS 2595 65 MUS	TELEPHONE #
1 /010 2	402
The state of the s	6 C7D CELL PHONE # 4/9- 438-74
DESCRIPTION OF WORK TO BE PERFORMED	undation Rapack
ESTIMATED COMPLETION DATE	ESTIMATED COST
Affected Floor Area (AFA): In existing structures, it is the area affected by only the room and not all the rooms).	the improvement, i.e. a new wall dividing a room (the AFA would be
DESCRIPTION	The second secon
BUILDING:	FEE TOTAL COST
Decks	\$25.00 \$
Addition & Alterations Square foot in (AFA) x \$0.05	¥
Garage and Shed over 200 SF (Detached)	\$25.00 \$
Siding and/or Roofing	\$25.00 \$
Windows/Doors	Man a a s
ELECTRICAL:	\$25.00 \$
Electrical Circuits in (AFA) x \$3.00/Circuit	= \$ + \$25.00 = \$
Electrical Service Upgrade	00 - 4 -
MECHANICAL:	\$25.00 \$
Water Heater	\$25.00 \$
Furnace and/or AC Replacement	*
PLUMBING:	\$25.00 \$
Plumbing Traps in (AFA) $x $3.00/Trap =$	\$ + \$25.00 = \$
TOTAL plus Ohio Board	of Building Standards Fee 1% \$. 25
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL A ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF N I hereby certify that I am the Owner of the named property, and have	APOLEON BUILDING/ZONING DEPARTMENT
application as his her authorized agent and I agree to conform to all applicable laws of the jurisdiction, the code official or the code official's authorized representative shall have the authority to enter areas complicable to such permit.	ne Owner of record and that I have been outhorized by the Owner to make this In addition, if a permit for Work described in this application is issued, I certify that overed by such permit at any reasonable hour to enforce the received.
1 HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND	THE ABOVE LISTED INSTRUCTIONS
SIGNATURE OF APPLICANT: A Substitute of Applicant: Date: \$ 6-14-16	
PRINT NAME:	
BATCH# 345102 CHECK#55410 DATE (1.24.16	
DATE (1.47.10	