THE CITY OF NAPOLEON

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

Building Permit Permit Number: BP2009-108		Page 1 of 1 Printed: 9/22/2009	
Applicant Name: Tri-County Ro Address: 13883 Co Rd	ofing	Approval Date: 419-399-3964	5/11/2009
Owners			
Name: Osborn Realty Address: P.O. Box 746		Phone : 419-78	32-7916
Defiance, OH 4	3512		
Contractors			
Contractor Type: Builder			
Name: Tri-Count	y Roofing	Paulding, OH 45879	
Address: 13883 Co	Rd 162		
		Phone:	419-399-3964
Fees and Receipts:			
Number	Description		Amount
FEE2009-500	Siding / Roofing		\$25.00
FEE2009-501	State 1% fee (Calc)	·	\$0.25
		Total Fees:	\$25.25
RCPT2009-337			\$25.25
		Total Receipts:	\$25.25
Roof			
•			
APPLICANTS SIGNATURE:		DATE:	
▼ REMINDE	R: YOU MUST CALL (419)592-4010 FOR AN INSPEC	TION

CITY OF NAPOLEON GENERAL PERMIT APPLICATION THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS, & REMODELING.

OWNER: DESCRIPTION OF WORK TO BE PHONE: 418-183-1916 CITY: LEFTANCE ZIP: 43572 CITY: LEFTANCE ZIP: 43572 CITY: LEFTANCE ZIP: 43572 CITY: LEFTANCE ZIP: 43572 CONTRACTOR: 1/9-399-3964 CELL PHONE# CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO: If yes to whom: DESCRIPTION OF WORK TO BE PERFORMED: 465-468				
CONTRACTOR: Rounty Roof, NG /NC PHONE #: 4/19-399-3964 CELL PHONE# CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO: Is any of the above job going to be subcontracted out? Yes No: If yes to whom: DESCRIPTION OF WORK TO BE PERFORMED:				
CELL PHONE# CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO: Is any of the above job going to be subcontracted out? Yes No: If yes to whom: DESCRIPTION OF WORK TO BE PERFORMED: A Tracked				
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Is any of the above job going to be subcontracted out? Yes No: If yes to whom: DESCRIPTION OF WORK TO BE PERFORMED: Attacked				
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DESCRIPTION OF WORK TO BE PERFORMED:				
DESCRIPTION OF WORK TO BE PERFORMED: Attacked				
ESTIMATED COMPLETION DATE: // /25 /00				
Addition 8 Alexandrus Communication (ATA)				
Addition & Alterations Square foot in (AFA) x \$0.05 = \$ + \$25.00 = \$ Electrical Circuits in (AFA) x \$3.00/Circuit = \$ + \$25.00 = \$				
DL				
Siding and/or Roofing $ \begin{array}{ccccccccccccccccccccccccccccccccccc$				
Windows/Doors \$25.00 \$				
Decks \$25.00 \$				
Garage and Shed over 250 SF (Detached) \$25.00 \$				
Electrical Service Upgrade \$25.00 \$				
Water Heater \$25.00 \$				
Furnace and/or AC Replacement \$25.00 \$				
MBP (100.3100.46510) Subtotal: \$ 25 00				
(100.0000.42700) PLUS Ohio Board of Building Standards Fee + 1% \$. 25				
TOTAL FEE: \$ 25 25				
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: DATE:				
PRINT NAME:				
BATCH # 20824 CHECK # 4986 - 6913 DATE 06 - 60 - 69				



Tri-County Roofing, Inc.

visit us at www.782roof.com 13883 Rd 162 Paulding OH 45879 419-399-3964 419-782-ROOF 419-599-3964 419-238-7666 Fax 419-399-9662



Job Number:

09105

Jean - Osborn Realty

Name: Phone:

419-782-7916

Mailing Address:

PO Box 746, 1012 Ralston Ave 839 Maple St

Defiance, OH 43512

Job Address:

Date: 4/7/2009

Napoleon, OH 43545

JOB DESCRIPTION: House Roof

* Our Federal ID# is 31-1568282

*Remove all shingles to existing sheeting. Inspect the roof decking for warpage, water damage, and proper spacing. Install new 7/16" O.S.B. sheathing at \$ 1.50 per sq. ft. if needed or 1x dimensional lumber at \$ 4.00/sq ft.. Install additional nails where necessary to secure the decking. Install Weather Watch ice and water underlayment in the valleys. Install roofing underlayment, wide Quality drip edge, and new chimney step & counter flashings.

*Install Certainteed Landmark 30 shingles.

Remove damaged and rotten soffit from the front porch. Replace soffit with material to match and paint white to match.

Drywall repairs: To the three affected areas we will do the following- In bedroom one we will aply a skim coat to the 1' diameter hole and sand to a smooth finish. Mask off all affected areas, prime, and paint white with 2 coats of Sherwin Williams paint. The three areas are 9'x12', 9'x13', and 9'x6'.

Shingle Color: Choice	
Drip Edge Color: White	

Special Notes: Roof is in definate need for replacement. The roof is currently leaking at the transition on the upper section. Repair would not be an option due to current condition of roof.

This estimate includes all materials, labor, dump fees, permits, taxes, cleanup and disposal of all debris caused by said work. We will use a magnetic roller over the yard for nails, staples, etc. Any additional materials over and above quoted items will be billed at time and material.

PAYMENT: Our normal payment terms are 50% upon the acceptance of the job and the balance due day of completion. Any other payment terms must be approved by management. A 1.37% interest charge per month (15.6% APR) will be added to outstanding balances upon completion of work. Your warranty information if applicable, will be sent to you in the mail. We also enclose a customer survey with the receipt. We really appreciate any comments you may have so that we may continue to serve our customers to the best of our ability.

Your signature is an acceptance of this proposal and its terms. This proposal expires in 10 days unless otherwise indicated.

Estimator:	Clint Gates	
Assented by		
Accepted by:		