5KH-11-019

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 10/24/11 J	OB LOCATION	179 E.	Mau	mee	AU,	
OWNER PREM MEHTA TEL						E# 419-08
OWNER ADDRESS	79 E. M	Runee	A 3.		CEI HON	#
CONTRACTOR	uld vive	mbig		CE	LL PHON	E #
DESCRIPTION OF WORK	TO BE PERFORM	MED	New	Roov		
ESTIMATED COMPLETION DATE 10-29-11 ESTIMATED COST 6000						
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:					1.176	TOTAL COST
Decks					\$25.00	\$
Addition & Alterations S	quare foot in (AFA)	x \$0.05	= \$	+	\$25.00 =	\$
Garage and Shed over 2	00 SF (Detached)			· · · · · · · · · · · · · · · · · · ·	\$25.00	\$
Siding and/or Roofing					\$25.00	\$ \$
Windows/Doors	N					
ELECTRICAL:					\$25.00	\$
Electrical Cir	cuits in (AFA)	x \$3.00/Circuit	= \$	+	\$25.00 =	Ф.
Electrical Service Upgra	đe				\$25.00	\$
MECHANICAL:					\$23.00	\$
Water Heater					£25.00	
Furnace and/or AC Repl	acement				\$25.00	\$
PLUMBING:					\$25.00	\$
Plumbing T	Traps in (AFA)_	x \$3.00/Trap	= \$	+	\$25.00 =	\$
	TOTA	L plus <i>Ohio Boa</i>	rd of Buildi	ng Standard		\$
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR 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 the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit for Work described in this application is issued, I certify that applicable to such permit.						
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.						
SIGNATURE OF APPLICANT:			_ INE ADO	DATE:	BIRUCTION	NS.
PRINT NAME:						
PERMIT # P-KH-11-0190 BATCH # 25307 CHECK # COSh DATE 10-24-11						
					DAIL	2-01-11