

Print Date: 10/10/2017



## **City of Napoleon Building Department**

255 W. Riverview P.O. Box 151 Napoleon, OH 43545 Phone: (419) 592-4010

Fax: (419) 599-8393

Email:

## **Zoning Residential**

Permit Number:

P-17-0367

Expiration Date:

05/12/2018

Joel Mazur

250 Orchard

Napoleon, OH 43545

Description:

\$25.00 Zoning Permit

**Building Permit Info** 

Project Description: Construction Value:

Shed Installation 10'x10'

\$1,200.00

Multiple Spiess
Authorizing Signature

Date

## CITY OF NAPOLEON ZONING PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL DEMOLITIONS, FENCES, POOLS, SHEDS, DRIVEWAYS, SIDEWALKS & SEWERS

DATE 5-12-17 JOB LOCATION 250 ORCHORD LN	
OWNER JOEL MAZUR	TELEPHONE #419-344-7598
OWNED ADDRESS SOME	
CONTRACTOR SELF	CELL PHONE #
DESCRIPTION OF WORK TO BE PERFORMED 10' X 10' SHED	
ESTIMATED COMPLETION DATE 6-30-17	ESTIMATED COST # 1200
DESCRIPTION	FEE TOTAL COST
Demo Permit	(100.3100.46690) \$100.00 \$
Fence	\$25.00 \$
Pool	\$25.00 \$
Garage and Shed Under 200 SF (Detached)	\$25.00 \$ 25.00 <u></u>
Driveway	0 \$
Sidewalk/Curbing	0 \$
Sewer Outside	o s
	Subtotal: \$
	s C
	TOTAL FEE: \$ 25.00
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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: 5/12/17
PRINT NAME: Joel L. Mazul	
BATCH# 3619 CHECK# CASH	DATE 5-16-17

