CITY OF NAPOLEON ZONING PERMIT APPLICATION

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

DATE 3-21-16 JOB LOCATION 480 OXFORD ST	Napa	enn	OL	nio 435	45
OWNER Susan Shank				419)724	
OWNER ADDRESS 480 OXFORD St Napoleon	Ohio	FEFHON 425U	E#((11) 129	-0
CONTRACTOR Self				110100	11.
	CEL	L PHON	E#_	(419)706-	40
DESCRIPTION OF WORK TO BE PERFORMEDInstalling	Mood	en	Fe	nce	
ESTIMATED COMPLETION DATE 3-25-3-28-2016 EST	TIMATED CO	ST	100	, 00	
DESCRIPTION		FEE	Т	OTAL COST	
	00.46690)	\$100.00	\$		
Fence		\$25.00	\$	25	ē
Pool		\$25.00	\$		i i
Garage and Shed Under 200 SF (Detached)		\$25.00	\$		
DrivewaySidewalk/Curbing		0	\$		
Sewer Outside		0	\$		
Server Outside		0	\$		
	Subtotal:		\$		
			\$		
	ТОТА	L FEE:	\$	2500	
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE AB PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON F. I hereby certify that I am the Owner of the named property, or that the proposed work is authorized by the Owner of reapplication as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, it	BUILDING/ZONING	G DEPARTA	EN OR P MENT.	'ERFORMED UNTIL	- 1
the code official of the code official's authorized representative shall have the authority to enter areas covered by such applicable to such permit.	permit at any reason	escrivea in the able hour to	is applica enforce t	e Owner to make this ation is issued, I certify the provisions of the cod	that le(s)
HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOV	E LISTED INST	RUCTION	S.		
PRINT NAME: SUSAN Shank	-	21-1			
PRINT NAME: SUSan Shank					

CHECK# CANN

BATCH#

3/22/14

