

Print Date: 10/04/2017



City of Napoleon Building Department

255 W. Riverview
P.O. Box 151
Napoleon, OH 43545
Phone: (419) 592-4010
Fax: (419) 599-8393
Email:

Sidewalk/Curb Replacement

Permit Number: P-17-0332
Expiration Date: 09/11/2018

Tom Borstelman
6 Park

Napoleon, OH 43545

Description:

\$0.00 Sidewalk/Curbing 0.00 x \$0.0000

Building Permit Info

Project Description: Park Lane sidewalks
Construction Value: \$8,600.00

Mark B. Spiess

Authorizing Signature

10-4-17

Date

CITY OF NAPOLEON ZONING PERMIT APPLICATION

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

DATE 9-7-17 JOB LOCATION Park home 6-7-8
 OWNER _____ TELEPHONE # _____
 OWNER ADDRESS Park home House's #6#7#8
 CONTRACTOR Berk Excavating & Mowing CELL PHONE # 419-966-6888
 DESCRIPTION OF WORK TO BE PERFORMED Side walks
 ESTIMATED COMPLETION DATE 9-22-17 ESTIMATED COST \$ 8,600.00

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	\$
Driveway	0	\$
Sidewalk/Curbing	0	\$ 0
Sewer Outside	0	\$
Subtotal:	\$	0
	\$	
TOTAL FEE:	\$	0

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: <u>[Signature]</u>	DATE: <u>9-7-17</u>
PRINT NAME: <u>Kyle O. Spivack</u>	

BATCH #	CHECK #	DATE
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