## CITY OF NAPOLEON ZONING PERMIT APPLICATION

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

DATE 3-6-13 JOB LOCATION 1056 N PEKRY ST NAPORTON			
OWNER LESUE HELBERG		LEBUON	- 410 000 cm
OWNER ADDRESS 1056 N. FERRY ST KARDI FOR (			
CONTRACTOR TASON ACEXANDER (Friend) CELL PHONE #			
DESCRIPTION OF WORK TO BE PERFORMED REMOVE AND THINK IN AV &			
PUT IN NEW ONE			
ESTIMATED COMPLETION DATE 140 2 WEEK SESTIMATED COST 2500, 00			
DESCRIPTION		E E E	
Demo Permit	(100.3100.46690)	FEE 9100 00	TOTAL COST
Fence	(100.3100.46690)	\$100.00	\$
Pool	(100.3100.46690)	\$25.00	\$
Garage and Shed Under 200 SF (Detached)	(100.3100.46690)	\$25.00	\$
Driveway	(100.5100.40090)	\$25.00	\$
Sidewalk/Curbing		0	\$ 40
Sewer Outside		0	\$
		0	\$
	Subtotal:		s 0
			\$
	ТОТ	AL FEE:	s 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 the code official or the code official's 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)

I HEREBY ACKNOWLEDGE THAT LHAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

SIGNATURE OF APPLICANT AND THE ABOVE LISTED INSTRUCTIONS.

DATE:

DATE:

DATE:

DATE:

DATE:

DATE:

DATE:

DATE:

THEREBY ACKNOWLEDGE THAT LHAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

CHECK # DATE:

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