

City of Napoleon, Ohio

Zoning Department

255 West Riverview Avenue, P.O. Box 151
Napoleon, OH 43545
Kevin Schultheis Code Enforcement/ Zoning Administrator
Telephone: (419) 592-4010 Fax; (419) 599-8393
www.napoleonohio.com

RESIDENTIAL ZONING PERMIT

Issued Date:

September 11, 2024

Expiration Date:

September 11, 2025

Permit Number:

P-24-158

Job Location:

1140 Sheffield Ave.

Owner:

Mark Saman

700 Holgate Ave. Defiance, OH 43512

Contractor:

Tressler Plumbing LLC

Phone:

419-576-0302

Zone:

R-2: Low Density Residential

Set Backs:

Front: 0' Rear: 0' Side: 0'

Comments:

Sewer line repair

Permit Type:

Sewer repair

Fee: \$0.00

Status: Paid

Amount Due: \$0.00

Kevin Schultheis

Code Enforcement / Zoning Administrator



City of Napoleon, Ohio

Zoning Department 255 West Riverview Avenue, P.O. Box 151 Napoleon, OH 43545

Kevin Schultheis Code Enforcement / Interim Zoning Administrator Telephone: (419) 592-4010 Fax; (419) 599-8393 www.napoleonohio.com P-24-158

Residential Zoning Permit Application

Date 9-11-24 Job Location 1140 Sheffield Fre		: :1 =::
Owner Mark 50man Telephone #419-429-3441		
Owner Address 700 Holgate Ave Defiance		
Contractor Tressler Plumbing LLC Cell Phone # 419-576-0302		
Description of Work to be Performed Sewer line repair		
Estimated Completion Date 9-12-24 Estimated Cost 51,500		
Demo Permit - \$100.00 - See Separate Form	(MDEMO 100.1700.46690)	\$
Zoning Permit - \$25.00	(MZON 100.1700.46690)	\$
Fence/Pool/Deck - \$25.00	(MZON 100.1700.46690)	: \$
Accessory Building 200 SF or less (Detached) - \$25.00	(MZON 100.1700.46690)	\$
Driveway/Sidewalk/Curbing/Patio - \$0.00	(MZON 100.1700.46690)	\$
Drainage Permit/Outside Water/Sewer Repair - \$0.00	(MBLDG 510.0000.44730)	S @
1" Water Tap, 5/8" Meter, Copper Setter and Transmitter - \$1,200.00(Outside City - \$5,680) (MBLDG 510.0000.44730)	\$
1" Water Tap, 3/4" Meter, Copper Setter and Transmitter - \$1,300.00(Outside City - \$5,820) (MBLDG 510.0000.44730)	\$
1" Water Tap, 1" Meter, Copper Setter and Transmitter - \$1,400.00 (Outside City - \$5,960) (MBLDG 510.0000.44730)	\$
1" Meter, Copper Setter and Transmitter Without Tap - \$525.00	(MBLDG 510.0000.44730)	\$
3/4" Meter, Copper Setter and Transmitter Without Tap - \$440.87	(MBLDG 510.0000.44730)	\$
TOWNS IN CO. IN THE STATE OF THE STATE OF	(MBLDG 510.0000.44730)	\$
	MBLDG 520.0000.44830)	\$
	(MBLDG 520.0000.44830)	\$
Sewer Tap For Lots (Single Family) 12,200 Sq. Ft. or Greater - \$60.00	(MBLDG 520.000.44830)	\$
Sewer Tap For Lots (Two Family) 7,201 to 23,866 Sq. Ft. (x\$0.012)	*	\$
	(MBLDG 520.0000.44830)	
Sewer Tap For Lots (Two Family) 23,867 Sq. Ft. or Greater - \$200.00	(MBLDG 520.0000.44830)	\$
Sewer Tap For Lots (Three Family) 7,201 to 36,366 Sq. Ft. (x\$0.012)	(MBLDG 520.0000.44830)	\$
Sewer Tap For Lots (Three Family) 36,367 Sq. Ft. or Greater - \$350.00	(MBLDG 520.0000,44830)	\$
Sewer Tap Inspection Fee For Single Family or Duplex - \$60.00	(MBLDG 520.0000.44830)	\$
Inspection Fee Outside the Corporation Limits - Increase 50%	(MBLDG 520.0000.44830)	\$
	TOTAL FEE:	\$
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR AI. TERATION 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 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, icertify 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: De ug lasenle		DATE: 9-11-24
BATCH# DATE DATE		