

BUILDING & ZONING DEPARTMENT 255 W. RIVERVIEW (419)592-4010

Plumbir	ng Permit		Page 1 of 1
Permit N	umber: PL2009-22		Printed: 6/11/2009
ADDRES	ss: 205 Sy	camore Dr	
Applicant Name: Ke Address: 20	vin Milius 5 Sycamore	Approval Date: 6, 419-592-5272	/11/2009
Owners			
Address: 205	Address: 205 Sycamore		5272
	ooleon, OH 43545		
Contractors Contractor Type: Name: Address:	Jerry Glanz Trenching	Napoleon, OH 43545	
		Phone: 4	19-599-4103
Fees and Rece	ipts:		
Number	Description		Amount
		Total Fees:	\$0.00
		Total Receipts:	\$0.00
Storm drain i	n side yard swale.		
APPLICANTS SIGNATURE:		DATE:_	
✓	REMINDER: YOU MUST CALL (4	19)592-4010 FOR AN INSPECTION	ON



CITY OF Napoleon General Permit Application

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS & REMODELING

DATE 11/09 JOB LOCATION 205 Sycamore Lane			
OWNER BEUIN J MILIES TELEPHONE #419-592-53			
OWNER ADDRESS 205 Sycamore Lu- Napoleon, Ohio			
CONTRACTOR Jerry 5/anz CELL PHONE #			
DESCRIPTION OF WORK TO BE PERFORMED Ingtall gorm drain in suce your			
ESTIMATED COMPLETION DATE Full of June ESTIMATED COST 1800.00			
DESCRIPTION FEE TOTAL COST			
Demo Permit (100.3100.46690) \$100.00 \$			
Fence \$			
Garage and Shed Under 200 SF (Detached)			
Driveway \$			
Sidewalk/Curbing \$			
Sewer Outside \$			
Subtotal: \$			
\$			
TOTAL FEE: \$			
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREFOR AND NO USE OF THE ADOMESTICAL 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 THI 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 applicable to such permit at any reasonable hour to enforce the provisions of the code(s)			
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.			
SIGNATURE OF APPLICANT \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
PRINT NAME: KEWIN J. MILLYS			
BATCH # CHECK # DATE			

THE CITY OF NAPOLEON BUILDING & ZONING DEPARTMENT 255 W. RIVERVIEW (419)592-4010



Inspections

Address: 205 Sycamore Dr

Napoleon, OH 43545

Applicant: Kevin Milius

Page 1 of 1

Printed: 6/23/2009

Permit Number: PL2009-22

Inspection Date:

6/23/2009

INSP2009-83

Inspection Type:

Inspection Number:

Plumbing Final

Inspector: Marty Crossland

Status: Complete

Passed? ✓

Required Steps:

Comments:

Other Fields:

