CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

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DATE 9-29-14 JOB LOCATION 224 Sycamore Dr.		8
OWNER Adam Hockenberry	_TELEPHONE ;	# 4/7 439106d
OWNER ADDRESS 224 Sycamore Dr.		# 4194391062
CONTRACTOR Self		
DESCRIPTION OF WORK TO BE PERFORMED Electric Service	Change	over
	Be	500
ESTIMATED COMPLETION DATE 10-3-19 ESTIMATED COST		
Affected Floor Area (AFA): In existing structures, it is the area affected by the improvement, i.e only the room and not all the rooms).	, a new wall dividing	g a room (the AFA would be
DESCRIPTION	FEE	TOTAL COST
BUILDING:		
Decks	\$25.00	\$
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+ \$25.00 =	\$
Garage and Shed over 200 SF (Detached)	\$25.00	\$
Siding and/or Roofing	\$25.00	\$
Windows/Doors	\$25.00	\$
ELECTRICAL:		
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 =	\$
Electrical Service Upgrade	\$25.00	\$ 25.00
MECHANICAL:	\$25.00	\$
Water Heater	\$25.00	\$
Furnace and/or AC Replacement		
PLUMBING: Trans in (AFA) x \$3.00/Trap = \$	+ \$25.00 =	\$
Plumbing Haps III (ALA)		25
TOTAL plus Ohio Board of Building S	tandards Fee 1%	\$,00
	TOTAL FEE:	\$ 25.25
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 at the Owner of the named property, or that the proposed work is authorized by the Owner of record and that I have been 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 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 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 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 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 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 application is a permit for Work described in this application is issued, I certify that application is issued, I certify that application is a permit for Work described in this application is issued, I certify that application is a permit for Work described in this application.		
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.		
SIGNATURE OF APPLICANT: ALS D.	ATE: 9-29	14
PRINT NAME: Adam Hockenserry		
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