

84-293427

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 1/4/17 JOB LOCATION 519 Vine St, Napoleon, OH
 OWNER Denise Brown TELEPHONE # 419-579-0295
 OWNER ADDRESS 519 Vine St, Napoleon, OH 43545
 CONTRACTOR Ohio Bath Solutions dba Bath Fitter CELL PHONE # 717-932-2500
542 Industrial Dr, Lewisberry, PA 17339
 DESCRIPTION OF WORK TO BE PERFORMED Acrylic wall, fixture

ESTIMATED COMPLETION DATE 2/17/17 ESTIMATED COST \$3,279.00

Affected Floor Area (AFA): In existing structures, it is the area affected by the improvement, i.e. a new wall dividing a room (the AFA would be only the room and not all the rooms).

DESCRIPTION	FEE	TOTAL COST
BUILDING:		
<i>Decks</i>	\$25.00	\$
<i>Addition & Alterations</i> 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:		
<i>Electrical</i> Circuits in (AFA) x \$3.00/Circuit = \$	+	\$25.00 = \$
Electrical Service Upgrade	\$25.00	\$
MECHANICAL:		
Water Heater	\$25.00	\$
Furnace and/or AC Replacement	\$25.00	\$
PLUMBING:		
<i>Plumbing</i> Traps in (AFA) <u>1</u> x \$3.00/Trap = \$ <u>3.00</u>	+	\$25.00 = \$ <u>28.00</u>
TOTAL plus Ohio Board of Building Standards Fee 1%		\$ <u>.28</u>

P-17-0012

TOTAL FEE: \$ 28.28

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: James Paul DATE: 1/4/17

PRINT NAME: _____
 BATCH # 35931 CHECK # 80081 DATE 1/9/16


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One-Day Bath Remodeling

To Whom It May Concern:

Please fax a copy of the approved plumbing permit to (419) 861-3711 as soon as possible.

Thank you,



Bridget Eardly
Branch Administrator
Office 84-Holland
Ph: (419) 861-3715
Fax: (419) 861-3711

1-800-594-8776

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