## CITY OF NAPOLEON GENERAL PERMIT APPLICATION THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BOILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS & REMODELING

DATE 10-17-13 JOBLOCATION 717 WEISTE	D
OWNER HEIDI WETRAUCH	TELEPHONE # 592-0678
OWNER ADDRESS 717 WERSTED	
	CELL PHONE #
DESCRIPTION OF WORK TO BE PERFORMED FURMICE RE	DIACEMENT L
DESCRIPTION OF WORK TO BE PERFORMED POR NOTICE RE	12000 1
WATER HEATER	
ESTIMATED COMPLETION DATE ESTIMATED	O COST
Affected Floor Area (AFA): In existing structures, it is the area affected by the improvem AFA would be only the room and not all the rooms).	5
DESCRIPTION	FEE TOTAL COST
Audition & Australians Square foot in (1117)	\$25.00 = \$
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	\$25.00 = \$
Transing Traps in (13.77)	\$25.00 = \$
Siding and/or Roofing	\$25.00 \$
Windows/Doors	\$25.00 \$
Decks	\$25.00 \$
Garage and Shed over 250 SF O etacled	\$25.00 \$
Electrical Service Upgrade	\$25.00 \$
Water Heater	\$25.00 \$ 25
Furnace and/or AC Replacement	\$25.00 \$ 25
MBP (100.3100.46510)	Subtotal: \$ 50,00
(Co.0000,42100) PLUS Ohio Board of Building Standards Fee	+ 1% \$ 0.50
. т	OTAL FEE: 50,50
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRI ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHAL FERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON BUILDINGS.	CAL OR MECHANICAL INSTALLATION OR L BE UNDERTAKEN OR PERFORMED UNTIL THE ZONING DEPARTMENT.
I hereby certify that I am the Owner of the named property, or that the proposed work is evidorized by the Owner of record and the application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at an applicable to such permit.	ty reasonable hour to enforce the provisions of the code(s)
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTE	DINSTRUCTIONS.
SIGNATURE OF APPLICANT: DATE:	
PRINT NAME:	<u> </u>
[KINI NAME	10-21-13