CITY OF NAPOLEON GENERAL P	ERMIT APPLICATION
THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION PLUMBING, MECHANICAL & RE	INCLUDING BUILDING, ELECTRICAL.
DATE 3:30:16 JOB LOCATION 1144 WOOD AU	on 35
OWNER Thomas & Denise La Londe	TELEPHONE # 419-592-6989
OWNER ADDRESS 1144 LIVED 435	
CONTRACTOR Edwin J Glynn Greenworks Remodelin	
DESCRIPTION OF WORK TO BE PERFORMED <u>Tear off-ro</u>	ot, & re shingle
	0
ESTIMATED COMPLETION DATE April 3016 EST	IMATED COST #8200.00
Affected Floor Area (AFA): In existing structures, it is the area affected by the improver only the room and not all the rooms).	ment, i.e. a new wall dividing 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 \$ \$5.00
Windows/Doors	\$25.00 \$
ELECTRICAL:	
Electrical 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:	
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+ \$25.00 = \$
TOTAL plus Ohio Board of Buildi	
	TOTAL FEE: 8 25.25
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE AIPERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON	N, ELECTRICAL OR MECHANICAL INSTALLATION OR BOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE 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 rapplication as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, the code official or the code official's authorized representative shall have the authority to enter areas covered by suc applicable to such permit.	
I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABO	VE LISTED INSTRUCTIONS.
SIGNATURE OF APPLICANT:	DATE:
PRINT NAME:	
BATCH# 33971 CHECK# 9740	DATE 3 3 1 1 2
CHECK#   V	DATE 0 3 11 2