

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419) 592-4010

Plumbing Permit

Permit Number: PL2009-45

Page 1 of 1

Printed: 9/16/2009

ADDRESS:

233 Barnes Ave. W.

Applicant

Name: Home Solutions I LLC

Address: P.O. Box 702

Approval Date: 7/23/2009

419-966-3617

Owners

Name: Home Solutions I LLC

Address: P.O. Box 702

Bowling Green, OH 43402

Phone: 419-966-3617

Contractors

Fees and Receipts:

Number	Description	Amount
FEE2009-405	Plumbing	\$25.00
FEE2009-406	State 1% fee (Calc)	\$0.25

Total Fees: \$25.25

RCPT2009-286

\$25.25

Total Receipts: \$25.25

New Plumbing

SCANNED

APPLICANTS SIGNATURE: _____ DATE: _____

REMINDER: YOU MUST CALL (419)592-4010 FOR AN INSPECTION

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE 7/18/09 JOB LOCATION 233 West Byron
 OWNER Home solutions I LLC TELEPHONE # _____
 OWNER ADDRESS Po Box 702 Bowling Green Ohio 43402
 CONTRACTOR Self CELL PHONE # 419-966-3617

DESCRIPTION OF WORK TO BE PERFORMED _____

ESTIMATED COMPLETION DATE Oct 1 2009 ESTIMATED COST 40,000

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
Addition & Alterations Square foot in (AFA) x \$0.05 = \$	+ \$25.00 = \$	25.00
Electrical Circuits in (AFA) x \$3.00/Circuit = \$	+ \$25.00 = \$	25.00
Plumbing Traps in (AFA) x \$3.00/Trap = \$	+	\$25.00 = \$ 25.00
Siding and/or Roofing	\$25.00	\$
Windows/Doors	\$25.00	\$
Decks	\$25.00	\$
Garage and Shed over 250 SF (Detached)	\$25.00	\$
Electrical Service Upgrade	\$25.00	\$
Water Heater	\$25.00	\$
Furnace and/or AC Replacement	\$25.00	\$
	MBP (100.3100.46510)	Subtotal: \$ 75.00 25.00
	(100.0000.42700) PLUS Ohio Board of Building Standards Fee + 1%	\$ 75 . 25

TOTAL FEE: \$ ~~25.75~~ 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 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: [Signature] DATE: 7/18/09
 PRINT NAME: Kirk Weaver

BATCH # 21097 CHECK # 5266 DATE 07-23-09