



City of Napoleon, Ohio

Zoning Department

255 West Riverview Avenue, P.O. Box 151
Napoleon, OH 43545

Kevin Schultheis Code Enforcement / Zoning Administrator
Telephone: (419) 592-4010 Fax: (419) 599-8393
www.napoleonohio.com

RESIDENTIAL ZONING PERMIT

Issued Date: February 6, 2024
Expiration Date: February 6, 2025
Permit Number: P-24-010
Job Location: 1055 Willard
Owner: Ronnie Babcock
1055 Willard
Napoleon, OH 43545
Contractor: J.A. Hillis LLC
Phone: 419-783-7923
Zone: R-2: Low Density Residential
Set Backs: None for sewer
Comments: Sewer Repair
Permit Type: Sewer Repair
Fee: \$0.00
Status: Paid
Amount Due: \$0.00

Kevin Schultheis
Code Enforcement / Zoning Administrator



City of Napoleon, Ohio

Zoning Department

255 West Spencerville Avenue, P.O. Box 151
Napoleon, OH 43545

Mark R. Spiess, Senior Engineering Technician / Zoning Administrator
Telephone: (419) 392-4010 Fax: (419) 399-6393
www.napoleonohio.com

P-24-010

R-2

Residential Zoning Permit Application

Date 02-06-24 Job Location 1099 WILLARD
 Owner RONNIE BABCOCK Telephone # 419-591-6207
 Owner Address SAME
 Contractor J.A. HILLIS LLC Cell Phone # 419-783-7923
 Description of Work to be Performed SEWER REPAIR
 Estimated Completion Date 02-06-24 Estimated Cost \$5,500

Demo Permit - \$100.00 - See Separate Form	(BIBDND 100.1700.4600)	\$
Zoning Permit - \$25.00	(BIBDND 100.1700.4600)	\$
Fence/Pool/Deck - \$25.00	(BIBDND 100.1700.4600)	\$
Accessory Building Under 200 SF (Detached) - \$25.00	(BIBDND 100.1700.4600)	\$
Driveway/Sidewalk/Curbing/Path - \$0.00	(BIBDND 100.1700.4600)	\$
Drainage Permit/Outside Water/Sewer Repair - \$0.00	(BIBDND 510.000.4130)	\$ 0
1" Water Tap, 5/8" Meter, Copper Setter and Transmitter - \$1,200.00 (Outside City - \$5,600)	(BIBDND 510.000.4130)	\$
1" Water Tap, 3/4" Meter, Copper Setter and Transmitter - \$1,300.00 (Outside City - \$5,500)	(BIBDND 510.000.4130)	\$
1" Water Tap, 1" Meter, Copper Setter and Transmitter - \$1,400.00 (Outside City - \$5,900)	(BIBDND 510.000.4130)	\$
1" Meter, Copper Setter and Transmitter Without Tap - \$525.00	(BIBDND 510.000.4130)	\$
3/4" Meter, Copper Setter and Transmitter Without Tap - \$400.00	(BIBDND 510.000.4130)	\$
5/8" Meter, Copper Setter and Transmitter Without Tap - \$350.00	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots 7,200 Sq. Ft. Or Less - \$0.00	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Single Family) 7,201 To 12,199 Sq. Ft. (x \$0.012)	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Single Family) 12,200 Sq. Ft. or Greater - \$00.00	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Two Family) 7,201 to 23,066 Sq. Ft. (x \$0.012)	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Two Family) 23,067 Sq. Ft. or Greater - \$200.00	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Three Family) 7,201 to 36,366 Sq. Ft. (x \$0.012)	(BIBDND 510.000.4130)	\$
Sewer Tap For Lots (Three Family) 36,367 Sq. Ft. or Greater - \$350.00	(BIBDND 510.000.4130)	\$
Sewer Tap Inspection Fee For Single Family or Duplex - \$00.00	(BIBDND 510.000.4130)	\$
Inspection Fee Outside the Corporation Limits - Increase 50%	(BIBDND 510.000.4130)	\$
TOTAL FEE:		\$ 0

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 HEREON HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON ZONING DEPARTMENT.
 I hereby certify that I am the Owner of the named property, or that the proposed work to be undertaken 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: 2-6-24

BATCH#

CHECK#

DATE