PERMIT

CITY OF NAPOLEON 255 W. RIVERVIEW AVE NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING PH (419) 592-4010 FAX (419) 599-8393

PERMIT NO: 1201 DATE ISSUED: 07-02-02 ISSUED BY: MRD

JOB LOCATION: 527 AVON PL

EST. COST: 3000.00

LOT #:

SUBDIVISION NAME:

OWNER: REBAR JIM

ADDRESS: 10128 GOODBODY CT CSZ: COLUMBIA, MD 21044

PHONE: 410-884-3464

AGENT: VONDEYLEN PLBG & HTG

ADDRESS: 116 E CLINTON ST CSZ: NAPOLEON, OH 43545

PHONE: 419-592-4756

OTHER:

USE TYPE - RESIDENTIAL:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD: MAX HT: # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: X REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF: GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

BLDG VOL DEMO PERMIT:

WORK DESCRIPTION NEW AIR CONDITIONING

FEE DESCRIPTION

MECHANICAL PERMIT

PAID DATE

FEE AMOUNT DUE

11.00

TOTAL FEES DUE 11.00

DATE

APPLICANT SIGNATURE

## CITY OF NAPOLEON OHIO PERMIT APPLICATION THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL PLUMBING, MECHANICAL, DEMOLITION, REMODELING.

DATE 6-28-02	JOB LOCATION	8			on, according.
LOT #	SUBDIVISION NAME				
OWNER James Re	bar	PHON	E 592-	0884	
OWNER ADDRESS 527 H	von Place	CITY	X/prolen	i	7112 425UC
CONTRACTOR VON Dey	en Plag +t	4/5	PHONE (	92-475	~
CONTRACTOR ADDRESS 16	E. Clinton	1 (	CITY Naps/	lean	7TP 43541
CONTRACTOR FAX # 592-	H < 1				
DESCRIPTION OF WORK TO BE PR	ERFORMED:	nstall	new A	He	
ESTIMATED COST OF WORK TO E				ī	
WORK INFORMATION					
BUILDING: Basement Floor Area		Sq. Ft. 1st St	ory Living Area	1	Sa Et
2nd Floor Living Area		Sq. Ft. Garag	ge Floor Area		Sa Et
BUILDING SIZE: Length	Width St	tories	Height	DEMO VOL	0q. 1 .
Masonry ContractorAddress	City	Phone	St	Fax	
Electrical Contractor	City	Phone	St	Fax	
Plumbing ContractorAddress	City	Phone	St	Fax	
Heating ContractorAddress		Phone			
Insulation ContractorAddress	City			Fax	
Other Contractor attach information.					
ZONING INFORMATION (to be comp Lot Area FRSB	pleted by City): Distric SYSB RY	It Lot	Dimensions	Mar C	
by signing below agree to comply with all applicable City of Napo pproved by the building inspector of the City of Napoleon.	oleon Codes & Ordinances while perfon	ming the work herein descr	nbed. I understand that all	work for which a permit is	issued is required to be
Applicant Signature Dardall	161		6.28.0		
		# 11-0	0	5.00	base
	95%			11.00	· /

## CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1201					
DATE ISSUED: 07-02-2002					
JOB LOCATION: 527 AVON PL					
OWNER: REBAR, JIM					
OWNER PHONE: 410-884-3464					
CONTRACTOR: VONDEYLEN PLBG & HTG					
CONTRACTOR PHONE: 419-592-4756					
WORK DESCRIPTION: NEW AIR CONDITIONING					
PLUMBING: UNDGR RGHIN FINAL					
SEWER INSP					
MECHANICAL: UNDGR RGHIN FINAL					
FURNACE REPLC AIR COND					
ELECTRICAL: UNDGR RGHIN FINAL					
SERV UPGR					
BUILDING: SITE FTG FNDT					
STRUC ROOF EXT					
VENT ACCES EGRS					
SMKDT FINAL					
ISSUE TEMP OCCUP ISSUE OCCUP					
STRG SHED: SITE FINAL					
SIGN: FTG FINAL					
FENCE: SITE FINAL					
MISC INSP:					
NOTES:					

INSPECTOR INITIALS: \_\_\_\_\_

APPLICATION FOR CITY SIDEWALK AND/OR CURBING REPLACEMENT					
Location of project 527		skr file here			
JAMES REBAR		527 AVON PLACE			
Owner Name	Address				
NAPOLEON	43545	419-592-0894			
City	43545 Zip	Phone			
Type of work to be performed	: Curbing replacement	Sidewalk replacement			
Total length of curbing to be replaced Steet Total square footage of sidewalk to be replaced 180, 2000 180					
It is required that the City approve the replacement of sidewalks and curbing before the work commences.					
specifications whichever is app	plicable. Non compliant wor	leon Engineering Specifications and/or ODOT rk will not be eligible for reimbursement. equired by the City prior to placement of ty.			
reimburse the owner for curbin linear foot, if installed in accor  Reimbursement is made to the	oot, it installed in accordance of replacement in the right-ordered to City specification.  owner of the property not the by the City) for such work a	ent in the right-of-way at a rate of one dollar and the to City specifications. The City will of-way at a rate of twenty dollars (\$20.00) per the contractor. It is required that the owner along with a paid copy of the invoice from the			
Name of City registered contractor performing such work; (If there is no contractor involved mark Self)					
A EN Construct	w	City Lic.# <u>98019</u>			
Signature of property or	wner	April 23, 2003  Date			
This form must be signed by the	he City Engineer prior to co	mmoncoment of work in order to be all the			
This form must be signed by the City Engineer prior to commencement of work in order to be eligible for reimbursement according to the above schedule. Inspection by the City is required prior to					
placement of concrete and after work is completed. A "WORK IN RIGHT OF WAY" PERMIT IS REQUIRED BEFORE WORK MAY COMMENCE.					
	approved for construction and is eligi	ble for reimbursement in accordance with the schedule herein.			
City Engineer	nì	<u>4-28-03</u> Date			
City Purchase order number <u>R</u>	G 030685	City Permit number			