

P E R M I T

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

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

PERMIT NO: 99182

DATE ISSUED: 06-09-99

ISSUED BY: BND

JOB LOCATION: 125 BORDEAUX DR

EST. COST: 6300.00

LOT #:

SUBDIVISION NAME:

OWNER: DEHNKE, HENRY  
ADDRESS: 125 BORDEAUX DR  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-5656

AGENT: DAMMAN PLEG & HTG  
ADDRESS: N-033 CO RD 17D  
CSZ: OKOLONA, OH 43550  
PHONE: 419-758-3116

USE TYPE - RESIDENTIAL:

OTHER:

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: REPLMNT: ADD'N: ALTER: REMODEL:

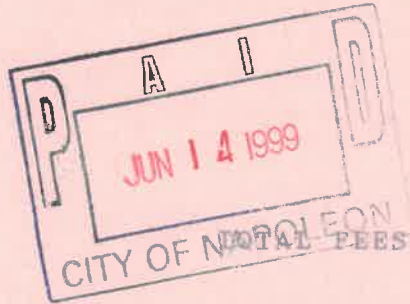
WORK INFORMATION

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

WORK DESCRIPTION

FURNACE W/DUCTING & A/C

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT		18.00



TOTAL FEES DUE 18.00

DATE

APPLICANT SIGNATURE

Please complete this form for each job.

Fill areas marked \*

# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

\* DATE 6/9/99 \* JOB LOCATION 125 Bordeaux

LOT # \_\_\_\_\_ SUBDIVISION NAME \_\_\_\_\_

\* OWNER Henry Dehnke \* PHONE 592-5656

\* OWNER ADDRESS 125 Bordeaux \* CITY Napoleon \* ZIP 43545

\* CONTRACTOR Damman Plbg, Htg & A/C \* PHONE 758-3116

\* CONTRACTOR ADDRESS N-033 Rd 17-0 \* CITY Okolona ZIP 43550

CONTRACTOR FAX # \_\_\_\_\_ CELL PHONE (Opt.) \_\_\_\_\_

\* DESCRIPTION OF WORK TO BE PERFORMED: Gas furnace, Ductwork & Air Conditioning

\* ESTIMATED COST OF WORK TO BE PERFORMED: \$6800.00

### WORK INFORMATION

BUILDING: Basement Floor Area \_\_\_\_\_ Sq. Ft. 1st Story Living Area \_\_\_\_\_ Sq. Ft.

2nd Floor Living Area \_\_\_\_\_ Sq. Ft. Garage Floor Area \_\_\_\_\_ Sq. Ft.

BUILDING SIZE: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_ DEMO VOL \_\_\_\_\_

Masonry Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Electrical Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Heating Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Insulation Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District \_\_\_\_\_ Lot Dimensions \_\_\_\_\_  
Lot Area \_\_\_\_\_ FR5B \_\_\_\_\_ SY5B \_\_\_\_\_ RYSB \_\_\_\_\_ Max Ht \_\_\_\_\_ ft Max Cov \_\_\_\_\_ %

I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am not aware of any facts which would render the same false or misleading.