

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: 448                      DATE ISSUED: 12-27-00                      ISSUED BY: BND  
JOB LOCATION: 315 BRIARCLIFF DR                      EST. COST: 2100.00

LOT #:    SUBDIVISION NAME:  
  
OWNER: LANKENAU, JEFFREY                      AGENT: JIM WESTFALL HTG & A  
ADDRESS: 315 BRIARCLIFF DR                      ADDRESS: U289 COUNTY ROAD 8  
CSZ: NAPOLEON, OH 43545                      CSZ: LIBERTY CENTER, OH 435  
PHONE: 419-592-8638                      PHONE: 419-533-3536

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:

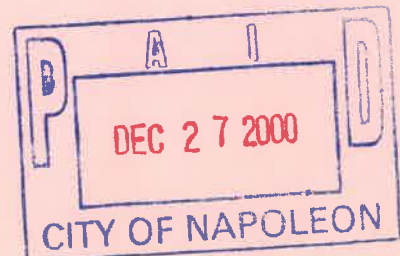
WORK DESCRIPTION  
FURNACE REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT		5.00

TOTAL FEES DUE                      5.00

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DATE

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APPLICANT SIGNATURE



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EST. COST: 2100.00

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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:
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WORK INFORMATION

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

WORK DESCRIPTION  
FURNACE REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT	12-28-00	5.00

TOTAL FEES DUE 5.00

DATE

APPLICANT SIGNATURE

# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

\* DATE 12-27-00 \* JOB LOCATION 315 BRIARCLIFF DRIVE

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

\* OWNER JEFF LANKENAU PHONE 592-8638

\* OWNER ADDRESS 315 Briarcliff DR CITY Napoleon ZIP 43545

\* CONTRACTOR Westfall Htg & A/C PHONE 533-3536

\* CONTRACTOR ADDRESS 4219 County Rd 8 CITY Liberty ZIP 43532

CONTRACTOR FAX # 533-3537 CELL PHONE (Opt.) \_\_\_\_\_

\* DESCRIPTION OF WORK TO BE PERFORMED: replace furnace

\* ESTIMATED COST OF WORK TO BE PERFORMED: \$2,100<sup>00</sup>

### 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 \_\_\_\_\_ FRSB \_\_\_\_\_ SYSB \_\_\_\_\_ RYSB \_\_\_\_\_ Max Ht \_\_\_\_\_ ft Max Cov \_\_\_\_\_ %

I by signing below agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that all work for which a permit is issued is required to be approved by the building inspector of the City of Napoleon.

\* Applicant Signature Jeff Lankenau \* Date 12-27-00

Please complete areas marked \*