

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: 956

DATE ISSUED: 12-19-01

ISSUED BY: BND

JOB LOCATION: 213 BROWNELL AVE

EST. COST: 600.00

LOT #:

SUBDIVISION NAME:

OWNER: SHELTON, LESTER
ADDRESS: 222 YEAGER ST
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-4640

AGENT: BARTELS ELECTRIC INC
ADDRESS: 13-414 CO RD S
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-2992

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:

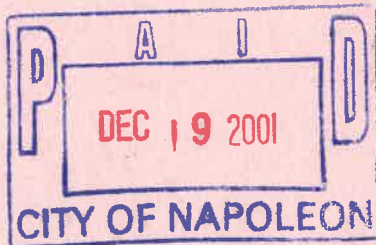
WORK TYPE - NEW REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION
ELEC SERV UPGRADE
2-GANG DUPLEX

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
ELECTRICAL PERMIT		15.00



TOTAL FEES DUE 15.00

12-19-01

DATE

John D Swartz

APPLICANT SIGNATURE

CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 956

ISSUED:12-19-2001

JOB LOCATION: 213 BROWNELL AVE

WORK DESCRIPTION: ELEC SERV UPGRADE

OWNER: SHELTON, LESTER

ADDRESS: 222 YEAGER ST NAPOLEON, OH 43545

OWNER PHONE: 419-592-4640

CONTRACTOR: BARTELS ELECTRIC INC

ADDRESS: 13-414 CO RD S NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-599-2992

ELECTRIC SERVICE UPGRADE NEW SERVICE INSTALLATION _____

INDUSTRIAL _____ COMMERCIAL _____ RESIDENTIAL 1PHASE _____ 3PHASE _____

SIZE OF SERVICE 100AMP _____ 150AMP _____ 200AMP 400AMP _____ OTHER _____

HUB SIZE - 1 1/4" _____ 1 1/2" _____ 2"

DESIRED VOLTAGE 120/240 OTHER 2-gang

UNDERGROUND SERVICE _____ OVERHEAD SERVICE

=====

DATE COMPLETED: _____ APPROVED BY: _____

OLD METER NUMBER: _____ NEW METER NUMBER: _____

COMMENTS:

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 12-19-01 JOB LOCATION 213 BROWN ELL AVS

LOT # _____ SUBDIVISION NAME _____

OWNER LESTER SHERT PHONE 419 592-4640

OWNER ADDRESS 229 KOLBE CITY NAPOLEON, O ZIP 43545

CONTRACTOR BARBERS ELECTRIC PHONE 419 599-2992

CONTRACTOR ADDRESS 13-414 COLDS CITY NAPOLEON ZIP 43545

CONTRACTOR FAX # 419 599-2992 CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: CHANGE SERVICE PANELS A&B

ESTIMATED COST OF WORK TO BE PERFORMED: 600⁰⁰

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 John D Swearingen Date 12-19-01