

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: 98021

DATE ISSUED: 01-30-98

ISSUED BY: BND

JOB LOCATION: 304 BROWNELL AVE

EST. COST: 265.00

LOT #:

SUBDIVISION NAME:

OWNER: BRANHAM, ANGELINA
ADDRESS: 304 BROWNELL AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-7733

AGENT: JW ELECTRIC
ADDRESS: 1212 E RIVERVIEW AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-2448

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

ELECTRIC SERVICE PANEL CHANGE

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
ELECTRICAL PERMIT		15.00

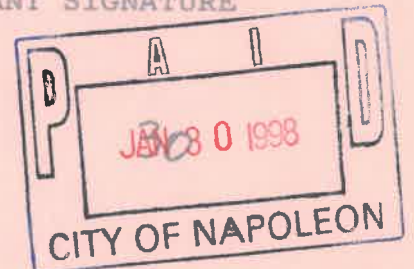
TOTAL FEES DUE 15.00

1-30-98

DATE

James J. Detrick

APPLICANT SIGNATURE



APPLICATION FOR
 Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit
FBGM - The City of Napoleon, Ohio, Building Department
 255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. _____

PERMIT NO. _____ ISSUED _____

JOB LOCATION 304 BROWNELL

LOT _____
 (Subdivision or Legal Description)

ISSUED BY _____
 (Building Official)

OWNER ANGELINA BRANHAM PHONE 599-7783

ADDRESS 304 BROWNELL

AGENT J.W. ELECTRIC PHONE 592-2448

ADDRESS 1212 E. RIVERVIEW APT 303 NAPOLEON

USE: Residential () Commercial () Industrial
 Other _____

WORK: () New () Addition Replacement () Remodel

ESTIMATED COST = \$ 26475

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
() Building	\$ _____	\$ _____	\$ _____
() Electrical	\$ _____	\$ _____	\$ _____
() Plumbing	\$ _____	\$ _____	\$ _____
() Mechanical	\$ _____	\$ _____	\$ _____
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
() Water Tap	\$ _____	\$ _____	\$ _____
() Sewer Tap	\$ _____	\$ _____	\$ _____
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Structure _____ Hours _____
 Plan Review: Electric _____ Hours _____

TOTAL FEES \$ _____
 Less Fees Paid \$ _____
 BALANCE DUE \$ _____

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>
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<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Ldg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>
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WORK INFORMATION

Building: Ground Floor Area _____ sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.
 Size: Length _____ Width _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: REPLACE PANEL BOX

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 98021

DATE ISSUED: 01-30-98

JOB LOCATION: 304 BROWNELL AVE

OWNER: BRANHAM, ANGELINA

OWNER PHONE: 419-599-7733

CONTRACTOR: JW ELECTRIC

CONTRACTOR PHONE: 419-592-2448

WORK DESCRIPTION: ELECTRIC SERVICE PANEL CHANGE

PLUMBING: UNDGR _____ RGHIN _____ FINAL _____

SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

SERV UPGR 2-2-98

BUILDING: SITE _____ FTG _____ FNDDT _____

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: _____