

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: 1187

DATE ISSUED: 06-20-02

ISSUED BY: MRD

JOB LOCATION: 565 CAMBRIDGE ST

EST. COST: 1500.00

LOT #:

SUBDIVISION NAME:

OWNER: DIONNE, TODD  
ADDRESS: 565 CAMBRIDGE ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-1475

AGENT: JIM WESTFALL HTG & A  
ADDRESS: U269 COUNTY ROAD 8  
CSZ: LIBERTY CENTER, OH 435  
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: X REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

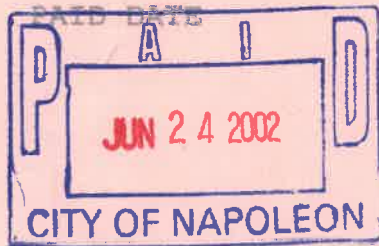
WORK DESCRIPTION  
NEW A/C

FEE DESCRIPTION

MECHANICAL PERMIT

FEE AMOUNT DUE

5.00



TOTAL FEES DUE

5.00

DATE

APPLICANT SIGNATURE



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1187

DATE ISSUED: 06-20-2002

JOB LOCATION: 565 CAMBRIDGE ST

OWNER: DIONNE, TODD

OWNER PHONE: 419-592-1475

CONTRACTOR: JIM WESTFALL HTG & A/C

CONTRACTOR PHONE: 419-533-3536

WORK DESCRIPTION: NEW A/C

PLUMBING: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

SEWER INSP \_\_\_\_\_

MECHANICAL: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

FURNACE REPLC \_\_\_\_\_ AIR COND 8-15-02

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: \_\_\_\_\_

1000

# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

\* DATE 6/20/02 \* JOB LOCATION 565 Cambridge, Napoleon

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

\* OWNER Todd Dionne PHONE 419-592-1475

\* OWNER ADDRESS 565 Cambridge CITY Napoleon ZIP 43545

\* CONTRACTOR Vin White, Hg & P PHONE 419-533-3536

\* CONTRACTOR ADDRESS 4209 County Rd 8 CITY Liberty, OH ZIP 43532

CONTRACTOR FAX # 419-533-3530 CELL PHONE (Opt.) \_\_\_\_\_

\* DESCRIPTION OF WORK TO BE PERFORMED: install new d/c

\* ESTIMATED COST OF WORK TO BE PERFORMED: \$1,450.00

## 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 \_\_\_\_\_ 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 [Signature] \* Date 6/20/02

Please complete areas marked \*

