

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01121 Issued Nov 85
date

Job Location 221 Clinton Street East
address

Lot _____
sub-div or legal discript

Issued By Paul E Buehrer
building official

Owner St Augustine Church
name tel. 592-7656

Address 221 Clinton Street East

Agent _____
builder-eng.-etc. tel.

Address _____

Description of Use Sewer Tap

Residential _____
no. dwelling units

Commercial GB Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ _____

| FEES | BASE | PLUS | TOTAL |
|--|-------------------|------|--|
| <input type="checkbox"/> BUILDING | | | |
| <input type="checkbox"/> ELECTRICAL | | | |
| <input type="checkbox"/> PLUMBING | | | |
| <input type="checkbox"/> MECHANICAL | | | |
| <input type="checkbox"/> DEMOLITION | | | |
| <input type="checkbox"/> ZONING | | | |
| <input type="checkbox"/> SIGN | | | |
| WATER TAP | 450 ⁰⁰ | | 450 ⁰⁰ |
| SEWER TAP | 60.00 | -0- | 60.00 |
| TEMP. ELECT. | | | |
| ADDITIONAL PLAN REVIEW | Struct. _____ hrs | | |
| | Elect. _____ hrs | | |
| TOTAL FEES..... | | | 510 ⁰⁰ 60.00 |
| LESS MIN. FEES PAID _____ <small>date</small> | | | -0- 510 ⁰⁰ 60.00 |
| BALANCE DUE..... | | | 510 ⁰⁰ 60.00 |

ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds | rear yd |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| max hgt | no pkg spaces | no ldg spaces | max cover | petition or appeal req'd | date appr |

WORK INFORMATION:

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: _____

Date _____ Applicant Signature _____

owner-agent

PAID

NOV 25 1985

CITY OF NAPOLEON

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01121 Issued 25 Nov 85
date

Job Location 221 Clinton Street East
address

Lot _____
sub-div or legal discript

Issued By Paul E Buehrer
building official

Owner St Augustine Church
name tel. 592-7656

Address 221 Clinton Street East

Agent _____
builder-eng.-etc. tel.

Address _____

Description of Use Sewer Tap

Residential _____
no. dwelling units

Commercial GB Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ _____

| FEES | BASE | PLUS | TOTAL |
|--|-------------------|------------------|-----------------|
| <input type="checkbox"/> BUILDING | | | |
| <input type="checkbox"/> ELECTRICAL | | | |
| <input type="checkbox"/> PLUMBING | | | |
| <input type="checkbox"/> MECHANICAL | | | |
| <input type="checkbox"/> DEMOLITION | | | |
| <input type="checkbox"/> ZONING | | | |
| <input type="checkbox"/> SIGN | | | |
| WATER TAP | | | |
| SEWER TAP | 60.00 | -0- | 60.00 |
| TEMP. ELECT. | | | |
| ADDITIONAL PLAN REVIEW | Struct. _____ hrs | Elect. _____ hrs | |
| TOTAL FEES..... | | | 60.00 |
| LESS MIN. FEES PAID _____ <small>date</small> | | | 0.00 |
| BALANCE DUE..... | | | 60.00 |

ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds | rear yd |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| max hgt | no pkg spaces | no ldg spaces | max cover | petition or appeal req'd | date appr |

WORK INFORMATION:

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: _____

Date _____ Applicant Signature _____
owner-agent

PAID

NOV 25 1985

CITY OF NAPOLEON

STATE OF ARIZONA
DEPARTMENT OF REVENUE

11/16

| DATE | DESCRIPTION | AMOUNT | TOTAL |
|-------|-------------|--------|-------|
| 11/15 | ... | ... | ... |
| 11/14 | ... | ... | ... |
| 11/13 | ... | ... | ... |
| 11/12 | ... | ... | ... |
| 11/11 | ... | ... | ... |
| 11/10 | ... | ... | ... |
| 11/9 | ... | ... | ... |
| 11/8 | ... | ... | ... |
| 11/7 | ... | ... | ... |
| 11/6 | ... | ... | ... |
| 11/5 | ... | ... | ... |
| 11/4 | ... | ... | ... |
| 11/3 | ... | ... | ... |
| 11/2 | ... | ... | ... |
| 11/1 | ... | ... | ... |

STATE OF ARIZONA
DEPARTMENT OF REVENUE