

**PERMIT**  
**CITY OF NAPOLEON, OHIO - BUILDING DEPARTMENT**  
 255 West Riverview Avenue, Napoleon, Ohio 43545 - (419) 592-4010

Permit No. 2984 Issued 8-2-93  
 Job Location 340 East Clinton  
 Lot \_\_\_\_\_  
 Issued by Brent N. Damman  
 Owner Board of Henry County Commissioners  
 Address 660 N. Perry St., Napoleon, OH  
 Agent Bob Reids Htg. 843-3468  
 Address 8432 W. Central Ave., Suite #7 Toledo, OH 43615  
 Use Type - Residential x  
 Other - Describe \_\_\_\_\_  
 No. Dwelling Units \_\_\_\_\_  
 New \_\_\_\_\_ Replacement \_\_\_\_\_  
 Add'n. x Alter \_\_\_\_\_ Remodel x  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 7,350.00

| FEES   | BASE            | PLUS     | TOTAL           |
|--|-----------------|----------|-----------------|
| <input type="checkbox"/> Building              | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Electrical            | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Plumbing              | \$ _____        | \$ _____ | \$ _____        |
| <input checked="" type="checkbox"/> Mechanical | \$ <u>18.00</u> | \$ _____ | \$ <u>18.00</u> |
| <input type="checkbox"/> Demolition            | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Zoning                | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Sign                  | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Water Tap             | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Sew. Insp.            | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Sewer Tap             | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Temp. Water           | \$ _____        | \$ _____ | \$ _____        |
| <input type="checkbox"/> Temp. Elec.           | \$ _____        | \$ _____ | \$ _____        |
| TOTAL FEES.....                                |                 |          | \$ <u>18.00</u> |
| LESS FEES PAID.....                            |                 |          | \$ _____        |
| BALANCE DUE.....                               |                 |          | \$ <u>18.00</u> |

**ZONING INFORMATION**

| district | lot dimensions |               | area      | front yd                 | side yd | 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) \_\_\_\_\_

Electrical: \_\_\_\_\_  
 Plumbing: \_\_\_\_\_  
 Mechanical: New addition - HVAC  
 Additional Information: \_\_\_\_\_

Date 9-24-93 Applicant Signature \_\_\_\_\_

**PAID**

SEP 24 1993

CITY OF NAPOLEON

