

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: 97412

DATE ISSUED: 10-21-97

ISSUED BY: BND

JOB LOCATION: 734 W CLINTON ST

EST. COST: 1200.00

LOT #:

SUBDIVISION NAME:

OWNER: REX, ANDREA  
ADDRESS: 734 W CLINTON ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-8934

AGENT: TOLEDO FENCE  
ADDRESS: 2525 HILL AVE  
CSZ: TOLEDO, OH 43607  
PHONE: 419-535-6833

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:  
PAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

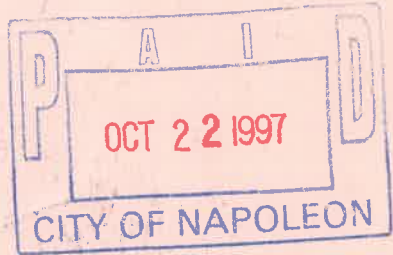
WORK DESCRIPTION  
FENCE SIDE YARDS

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		18.00

TOTAL FEES DUE 18.00

10-23-97  
-----  
DATE

*[Handwritten Signature]*  
-----  
APPLICANT SIGNATURE





**APPLICATION FOR**  
Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit  
**FROM - The City of Napoleon, Ohio, Building Department**  
255 West Hivarview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4070

ENTRY NO. \_\_\_\_\_

PERMIT NO. \_\_\_\_\_ ISSUED \_\_\_\_\_

JOB LOCATION 734 Clinton St.

LOT \_\_\_\_\_  
(Subdivision or Legal Description)

ISSUED BY \_\_\_\_\_  
(Building Official)

OWNER Andrea Rex PHONE 599-8934

ADDRESS 734 Clinton St.

AGENT Toledo Fence & Supply PHONE 535-6833

ADDRESS 2525 Hill Ave. Toledo, Oh. 43607

USE:  Residential ( ) Commercial ( ) Industrial  
( ) Other \_\_\_\_\_

TYPE: ( ) New ( ) Addition (X) Replacement ( ) Remodel

ESTIMATED COST = \$ #1202.00

	Base	Fees	Total
( ) Building	\$ _____	\$ _____	\$ _____
( ) Electrical	\$ _____	\$ _____	\$ _____
( ) Plumbing	\$ _____	\$ _____	\$ _____
( ) Mechanical	\$ _____	\$ _____	\$ _____
( ) Demolition	\$ _____	\$ _____	\$ _____
( ) Zoning	\$ _____	\$ _____	\$ _____
( ) Sign	\$ _____	\$ _____	\$ _____
( ) Water Tap	\$ _____	\$ _____	\$ _____
( ) Sewer Tap	\$ _____	\$ _____	\$ _____
( ) Temp Water	\$ _____	\$ _____	\$ _____
( ) Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
Electric \_\_\_\_\_ Hours \_\_\_\_\_

TOTAL FEES . . . . . \$ \_\_\_\_\_  
Less Fees Paid . . . . . \$ \_\_\_\_\_  
BALANCE DUE . . . . . \$ \_\_\_\_\_

**zoning INFORMATION**

District \_\_\_\_\_ Lot Dimensions \_\_\_\_\_ Area \_\_\_\_\_ Front Yard \_\_\_\_\_ Side Yard \_\_\_\_\_ Rear Yard \_\_\_\_\_

Max Height \_\_\_\_\_ No. Pkg. Spaces \_\_\_\_\_ No. Ldg. Spaces \_\_\_\_\_ Max Cover \_\_\_\_\_ Petition or Appeal Required-Date \_\_\_\_\_

**building INFORMATION**

Building: Ground Floor Area \_\_\_\_\_ sq. ft. Basement Floor Area \_\_\_\_\_ sq. ft.

1st Floor Area \_\_\_\_\_ sq. ft. 2nd Floor Area \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.

Use: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: install 154' of 3rail treated splitrail Fence with one 4' single gate and 48" high wire attached to Fence



**ELECTRICAL:** Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ ESTIMATED COST = \$ \_\_\_\_\_

Type of Work: ( ) New ( ) Service Change ( ) Rewiring ( ) Add'l Wiring TEMPORARY ELEC. REQUIRED - ( ) Yes ( ) No

Size of Service \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_ Number of New Circuits \_\_\_\_\_

Description of Work: \_\_\_\_\_

**PLUMBING:** Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ ESTIMATED COST = \$ \_\_\_\_\_

WATER TAP REQUIRED - ( ) Yes ( ) No Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_

SANITARY SEWER TAP REQUIRED - ( ) Yes ( ) No Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_

STREET SEWER TAP REQUIRED - ( ) Yes ( ) No Type of Pipe \_\_\_\_\_ STREET TO BE OPENED - ( ) Yes ( ) No

Main Building Drain Size = \_\_\_\_\_ Main Vent Pipe Size = \_\_\_\_\_

**LIST NUMBER OF PLUMBING FIXTURES BELOW:**

Water Closets = \_\_\_\_\_ Bathtubs = \_\_\_\_\_ Showers = \_\_\_\_\_ Lavatories = \_\_\_\_\_ Kitchen Sinks = \_\_\_\_\_ Disposal = \_\_\_\_\_

Clothes Washer = \_\_\_\_\_ Floor Drains = \_\_\_\_\_ Dishwasher = \_\_\_\_\_ Other \_\_\_\_\_ Total = \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL:** Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ ESTIMATED COST = \$ \_\_\_\_\_

HEATING SYSTEM - ( ) Forced Air ( ) Gravity ( ) Hot Water ( ) Steam ( ) Unit Heaters ( ) Radiant ( ) Baseboard

TYPE OF FUEL - ( ) Electric ( ) Natural Gas ( ) Propane ( ) Wood ( ) Coal ( ) Solar ( ) Geothermal Other \_\_\_\_\_

NUMBER OF HEAT ZONES = \_\_\_\_\_ HOT WATER - ( ) One (1) Pipe ( ) Two (2) Pipes ( ) Series Loop

ELECTRIC HEAT - Number of Circuits \_\_\_\_\_ Number of Furnaces \_\_\_\_\_ Number of Hot Air Runs \_\_\_\_\_

Number of Hot Water Radiators \_\_\_\_\_ Total Heat Loss \_\_\_\_\_ Rated Capacity of Furnace/Boiler \_\_\_\_\_

LOCATION OF HEATING UNITS - ( ) Crawl Space ( ) Floor Level ( ) Attic ( ) Suspended ( ) Roof ( ) Outside

Description of Work: \_\_\_\_\_

**DRAWINGS REQUIRED:** All applications must be accompanied by two (2) complete sets of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating layout, etc. All Plans shall be drawn to scale, show all existing structure on the Site Plans, and show electric panel and furnace locations.

**READ AND SIGN BELOW:** The undersigned hereby makes application for a Permit for all work described herein and agrees to complete the work in strict accordance with all applicable provisions of the current edition of the C.A.B.O. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

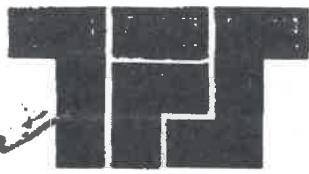
Signature of Applicant

*Jim Hyde*

Date

10/22/97





**TOLEDO FENCE & SUPPLY CO.**  
**2525 HILL AVE. TOLEDO, OHIO 43607**  
**(419) 535-6833 FAX: # (419) 535-5943**

ORDER #:	DATE: 10/16/97
NAME: Andrea Rex	JOB NAME:
STREET: 734 Clinton St.	JOB LOCATION: same off Scott St.
CITY/STATE: Napoleon, Oh. 43545	
ATTN:	PHONE: Home: 599-8934 Business: 598-6618

Style - Splitrail Gauge \_\_\_\_\_ Height 48" Total Footage 154' + Gate  
 3rail CCA Treated / Type Green Tot 3 Lotwire  
 2 Line Posts 3 hole CCA Rail 11' CCA (45)  
 Gate  
 1 Gate 48" x 3rail CCA Single  
 Gate 48" Green Tot 3 Lotwire  
 4 End Posts 3 hole CCA  
 2 Cor. Posts 3 hole CCA  
 1 Gate Posts Concrete

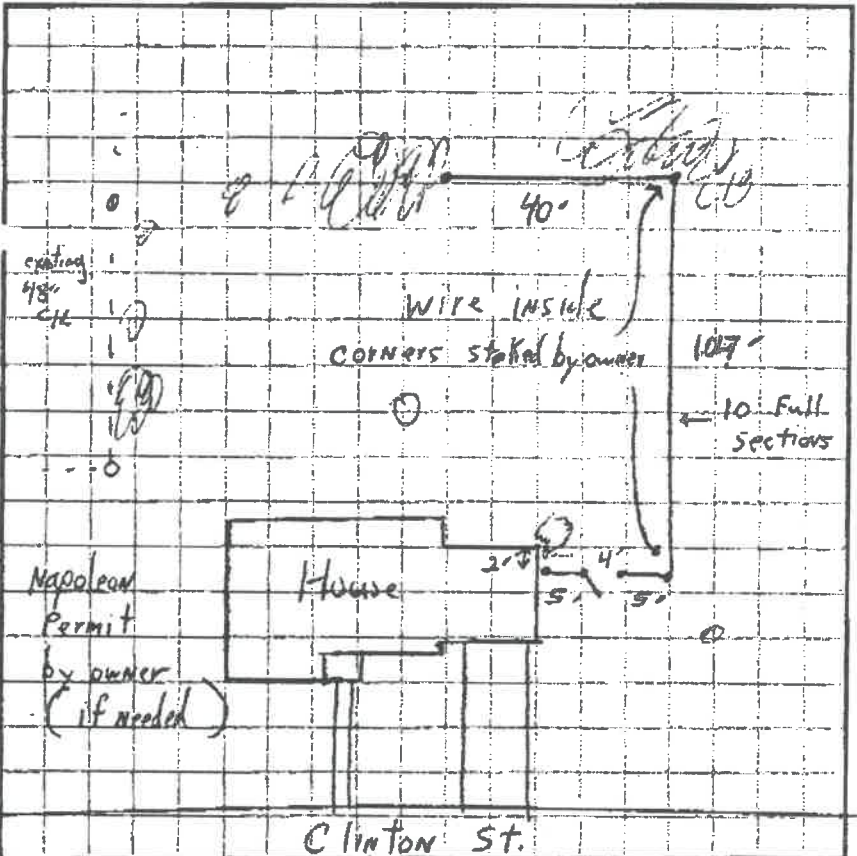
Complete Fence to Cost \$1202.00  
 M \_\_\_\_\_

Terms  
 1/3 DOWN WITH SIGNED COPY OF CONTRACT REFUNDED IF JOB IS CANCELLED. BALANCE PAID TO CREW ON COMPLETION.  
 All accounts 30 days past due are subject to 1% per month FINANCE CHARGES (Equal To 18% per year) on unpaid balance.

Date Erected \_\_\_\_\_

REMARKS  
 OUPS Reference No.: 1016 070 013  
 Date Ready: 10/21/97 8:00  
 County: Henry CITY PERM. Napoleon

DATE	TIME	CREW



Call in Visa # For Downpayment

WE ARE NOT RESPONSIBLE FOR BOUNDARY LINES, PRIVATE UNDERGROUND UTILITIES OR SPRINKLERS, WHICH MUST BE LOCATED BY THE PROPERTY OWNER. EXTRA CHARGE WILL BE MADE WHERE SHALE OR STONE IS ENCOUNTERED IN DIGGING POST HOLES.

This Agreement includes provisions set forth on the reverse side hereof.

Pd Visa 10/16  
 Down Payment: \$400.00  
 Balance Due: \$802.00

Customer Signature Jim Hagle  
 Address \_\_\_\_\_  
**THE TOLEDO FENCE AND SUPPLY CO.**  
 By [Signature]





CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 97412

DATE ISSUED: 10-21-97

JOB LOCATION: 734 W CLINTON ST

OWNER: REX, ANDREA

OWNER PHONE: 419-599-8934

CONTRACTOR: TOLEDO FENCE & SUPPLY CO

CONTRACTOR PHONE: 419-535-6833

WORK DESCRIPTION: FENCE SIDE YARDS

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

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

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

                  FURNACE REPLC \_\_\_\_\_      AIR COND \_\_\_\_\_

ELECTRICAL:    UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  SERV UPGR \_\_\_\_\_

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: \_\_\_\_\_

