

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: 1223

DATE ISSUED: 07-11-02

ISSUED BY: MRD

JOB LOCATION: 12-940 CO RD V

EST. COST: 725.00

LOT #:

SUBDIVISION NAME:

OWNER: COOPER, IVAN  
ADDRESS: 12-940 CO RD V  
CSZ: NAPOLEON, OH 43545  
PHONE:

AGENT: BARTELS ELECTRIC INC  
ADDRESS: 13-414 CO RD S  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-2992

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: X ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION

UPGRADE ELEC. 200AMP  
OVERHEAD W/BREAKERS

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

ELECTRICAL PERMIT

0.00

TOTAL FEES DUE 0.00

7-15-02

DATE

*John D Swearingen*  
APPLICANT SIGNATURE

# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 7-2-02 JOB LOCATION 12940 CORV

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

OWNER IVAN COOPER PHONE \_\_\_\_\_

OWNER ADDRESS 12-940 CORV CITY NAPOLEON, OH ZIP 43545

CONTRACTOR BARTAS ELECTRIC INC PHONE 419 599-2992

CONTRACTOR ADDRESS 13-414 CORDS CITY NAPOLEON, OH ZIP 43545

CONTRACTOR FAX # 419 599-2992 CELL PHONE (Opt.) 392-0509

DESCRIPTION OF WORK TO BE PERFORMED: INSTALL METER & DISC. COMB. ON PILES.

ESTIMATED COST OF WORK TO BE PERFORMED: 9725.00

## 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 John D Swearingen Date 7-2-02

Description:  
200 OH  
w/Brakers

meter Release only - check status

CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE  
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 1223

ISSUED: 07-11-2002

JOB LOCATION: 12-940 CO RD V

WORK DESCRIPTION: UPGRADE ELEC. 200AMP

OWNER: COOPER, IVAN

ADDRESS: 12-940 CO RD V NAPOLEON, OH 43545

OWNER PHONE:

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CONTRACTOR: BARTELS ELECTRIC INC

ADDRESS: 13-414 CO RD S NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-599-2992

ELECTRIC SERVICE UPGRADE  NEW SERVICE INSTALLATION \_\_\_\_\_

INDUSTRIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ RESIDENTIAL  1PHASE \_\_\_\_\_ 3PHASE \_\_\_\_\_

SIZE OF SERVICE 100AMP \_\_\_\_\_ 150AMP \_\_\_\_\_ 200AMP  400AMP \_\_\_\_\_ OTHER \_\_\_\_\_

HUB SIZE - 1 1/4" \_\_\_\_\_ 1 1/2" \_\_\_\_\_ 2"

DESIRED VOLTAGE 120/240  OTHER \_\_\_\_\_

UNDERGROUND SERVICE \_\_\_\_\_ OVERHEAD SERVICE

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DATE COMPLETED: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

OLD METER NUMBER: \_\_\_\_\_ NEW METER NUMBER: \_\_\_\_\_

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_