

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: 1662

DATE ISSUED: 06-09-03

ISSUED BY: BND

JOB LOCATION: 901 DAGGETT DR

EST. COST: 3600.00

LOT #:

SUBDIVISION NAME:

OWNER: BOOTH RUTH
ADDRESS: 901 DAGGETT DR
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-7954

AGENT: SELF
ADDRESS:
CSZ:
PHONE:

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: ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION

FENCE
PRIVATE

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

BUILDING PERMIT

45.00

TOTAL FEES DUE 45.00

6-10-03

DATE

Ruth Booth

APPLICANT SIGNATURE



CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE _____ JOB LOCATION 901 DAGGETT

LOT # _____ SUBDIVISION NAME _____

OWNER RUTH BOOTH PHONE 592-7954

OWNER ADDRESS 901 DAGGETT CITY _____ ZIP _____

CONTRACTOR SELF PHONE _____

CONTRACTOR ADDRESS _____ CITY _____ ZIP _____

CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: INSTALLING FENCE - 5' PRIVACY

ESTIMATED COST OF WORK TO BE PERFORMED: \$ 3000⁰⁰

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 Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Electrical Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Plumbing Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Heating Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Insulation Contractor Address _____ City _____ Phone _____ Fax _____ 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 _____ Date _____

PERMIT # 1662-

BUILDING INSPECTION REQUEST FORM

LOCATION 901 Daggett Permit# _____

Owner Name Ruth Barth

Contractor Name Self

Contractor Cell and/or Job Phone# 419 592 7954

Date and time setup for inspection 6-25-03 1:30pm

Must have a minimum of 2hour notice. Check calendar for scheduling conflicts.

- Building
- Footer
- Foundation
- Temporary Pole
- Electric Rough
- Electric Service
- Electric Final
- Plumbing Rough
- Plumbing Final
- Plumbing Underground

- Demolition
- Heating Rough
- Heating Final
- Sidewalk/Driveway
- Sign
- Swimming Pools
- Temporary Occupancy
- Occupancy
- Sewer Inspection
- Other Fence

OK, BMD 6-25-03

APPROVED

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1662

DATE ISSUED: 06-09-2003

JOB LOCATION: 901 DAGGETT DR

OWNER: BOOTH RUTH

OWNER PHONE: 419-592-7954

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: FENCE

PLUMBING: UNDGR _____ RGHIN _____ FINAL _____

SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

FURNACE REPLC _____ AIR COND _____

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: Brd