

CITY OF NAPOLEON, OHIO
DIVISION OF BUILDING
INSPECTIONS

Date 7/3/80

Address of Property 1220 Detroit

Single Two-Family _____ Apt. _____ Comm _____

Type of Inspection Electric Service 100 amp
Requested by:
Name _____

Address _____

Telephone _____

Permit No. _____

Excavation	Framing
Footers	Electrical
Footing Drains	Plumbing
Ext. Storm	Heating
Ext. Sanitary	Misc.
Int. Storm	<u>Service entrance</u>
Int. Sanitary	<u>+ Panel OK</u>
Foundation Final	Final

ROUGH IN

REMARKS _____

Date 7/3/80 Inspector A. W. [Signature]