

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: 1184

DATE ISSUED: 06-18-02

ISSUED BY: MRD

JOB LOCATION: 1088 DODD ST

EST. COST: 500.00

LOT #:

SUBDIVISION NAME:

OWNER: HOFF, JUNIOR
ADDRESS: 895 KENILWORTH AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-4572

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:

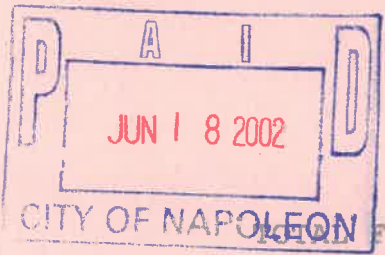
WORK TYPE - NEW: REPLMNT: X ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION
REPLACE MAST & MAIN

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
ELECTRICAL PERMIT		15.00



FEES DUE 15.00

DATE

APPLICANT SIGNATURE

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 #: 1184

ISSUED:06-18-2002

JOB LOCATION: 1088 DODD ST

WORK DESCRIPTION: REPLACE MAST & MAIN

OWNER: HOFF, JUNIOR

ADDRESS: 895 KENILWORTH AVE NAPOLEON, OH 43545

OWNER PHONE: 419-592-4572

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

=====

DATE COMPLETED: _____ APPROVED BY: _____

OLD METER NUMBER: _____ NEW METER NUMBER: _____

COMMENTS:

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 6-18-02 JOB LOCATION 1088 DODD ST

LOT # _____ SUBDIVISION NAME _____

OWNER JR. HOFF PHONE 592-4572

OWNER ADDRESS 895 KENILWORTH CITY NAPOLEON, O ZIP 43545

CONTRACTOR BALERS ELECTRIC INC PHONE 599-2992

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

CONTRACTOR FAX # 419 599-2792 CELL PHONE (Opt.) 392-0509

DESCRIPTION OF WORK TO BE PERFORMED: REPLACE MAST! MAIN

ESTIMATED COST OF WORK TO BE PERFORMED: 500⁰⁰

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 Swearingen Date 6-18-02

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1184

DATE ISSUED: 06-18-2002

JOB LOCATION: 1088 DODD ST

OWNER: HOFF, JUNIOR

OWNER PHONE: 419-592-4572

CONTRACTOR: BARTELS ELECTRIC INC

CONTRACTOR PHONE: 419-599-2992

WORK DESCRIPTION: REPLACE MAST & MAIN

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: _____