

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: 1849

DATE ISSUED: 09-02-03

ISSUED BY: TJK

JOB LOCATION: 30 DUQUESNE DR

EST. COST: 650.00

LOT #:

SUBDIVISION NAME:

OWNER: VARGO, PAT  
ADDRESS: 30 DUQUESNE DR  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-8058

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  
PRIVACY 40'

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		18.00

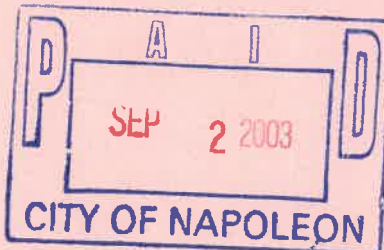
TOTAL FEES DUE 18.00

9-2-03

DATE

*Dorothy J. Kendall*

APPLICANT SIGNATURE





**CITY OF NAPOLEON GENERAL PERMIT APPLICATION**  
THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL,  
PLUMBING, MECHANICAL, DEMILITIONS, REMODELING

Date 9-2-03 Job Location 30 Duquesne  
Owner PATRICIA VARGO Phone 419-592-8508  
Owner Address 30 DUQUESNE City NAPOLEON Zip 43545  
Contractor SELF Phone \_\_\_\_\_  
Description of work to be preformed FENCE IN BACK YARD-PRIVACY  
40'

Estimated cost of work to be preformed \_\_\_\_\_

Please indicate the type of work you will be performing by

- |   |  |
|---|--|
| <input type="checkbox"/> A/C Add On                 | <input type="checkbox"/> Remodeling    |
| <input type="checkbox"/> Boiler Replacement         | <input type="checkbox"/> Roofing       |
| <input type="checkbox"/> Curbing                    | <input type="checkbox"/> Sewer Repairs |
| <input type="checkbox"/> Decks                      | <input type="checkbox"/> Sidewalk      |
| <input type="checkbox"/> Driveway                   | <input type="checkbox"/> Siding        |
| <input type="checkbox"/> Electrical Service Upgrade | <input type="checkbox"/> Sign          |
| <input type="checkbox"/> Electrical Service New     | <input type="checkbox"/> Storage Shed  |
| <input checked="" type="checkbox"/> Fence           | <input type="checkbox"/> Street Bond   |
| <input type="checkbox"/> Foundation                 | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Furnace Replacement        | <input type="checkbox"/> Temp Electric |
| <input type="checkbox"/> Furnace New                | <input type="checkbox"/> Water Tap     |
| <input type="checkbox"/> Lawn Meter                 | <input type="checkbox"/> Windows       |
| <input type="checkbox"/> Plumbing                   | <input type="checkbox"/> Zoning        |
| <input type="checkbox"/> Others                     |  |

1849 Permit Number



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1849

DATE ISSUED: 09-02-2003

JOB LOCATION: 30 DUQUESNE DR

OWNER: VARGO, PAT

OWNER PHONE: 419-592-8058

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: \_\_\_\_\_

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1849

DATE ISSUED: 09-02-2003

JOB LOCATION: 30 DUQUESNE DR

OWNER: VARGO, PAT

OWNER PHONE: 419-252-8028

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: FENCE

PLUMBING: UNDER \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

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

MECHANICAL: UNDER \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

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

ELECTRICAL: UNDER \_\_\_\_\_ 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: \_\_\_\_\_