

PERMIT

City of Napoleon  
255 W. Riverview  
Napoleon, OH 43545

Division of Building and Zoning  
PH (419) 592-4010  
FAX (419) 599-8393

Permit No: 002327

Date Issued: 08-13-04

Issued by: BND

Job Location: 718 ERIE ST

Est. Cost: 500.00

Lot #:

Subdivision Name:

Owner: MILLER, CAROLYN  
Address: 718 ERIE ST  
CSZ: NAPOLEON, OH 43545  
Phone: 419-592-4484

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: Addn'n: Alter: X Remodel:

WORK INFORMATION

Size - Lgth: Width: Stories: Living Area SF:  
Garage Area SF: Height: Bldg Vol Demo Permit:

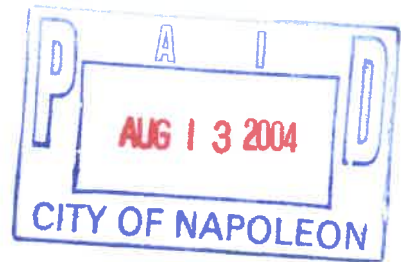
WORK DESCRIPTION  
REMODEL FIRE DAMAGE

FEE DESCRIPTION  
BUILDING PERMIT

PAID DATE

FEE AMOUNT DUE  
9.00

Total Fees Due 9.00



8/13/04  
Date

Carolyn Miller  
Applicant Signature



# HOME AND ADDITION PERMIT APPLICATION

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

JOB LOCATION 718 ERIE ST.  
 SUBDIVISION NAME AROLYN MILLER  
 ADDRESS 718 ERIE ST. PHONE 419-9661654 ZIP 43545  
 CONTRACTOR - AMERICAN BUILDERS CITY NAPOLION  
 CONTRACTOR ADDRESS 648 SYLVANIA AVE. PHONE 419-4765255  
 CONTRACTOR FAX # 419-4768183 CITY TOLEDO ZIP OH 43612  
 DESCRIPTION OF WORK TO BE PERFORMED: PRIMER BASEMENT + PAINT / ELECT. / HEATING  
 ESTIMATED COST OF WORK TO BE PERFORMED: 7000

### 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 \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip \_\_\_\_\_

Electrical Contractor PEAK ELECT. City TOLEDO Phone 419-3921272 St OH Fax 419-4729233  
 Address 4901 SUMMIT ST. City TOLEDO Phone \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip 43611

Plumbing Contractor \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip \_\_\_\_\_  
 Heating Contractor MAURICE VAUSEY City TOLEDO Phone 419-5317855 St OH Fax 419-5317868  
 Address 2714 NEBRASKA City TOLEDO Phone \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip 43607

Insulation Contractor \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip \_\_\_\_\_  
 Other Contractor attach information. \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_ St \_\_\_\_\_ Fax \_\_\_\_\_ Zip \_\_\_\_\_

ZONING INFORMATION (to be completed by City): District \_\_\_\_\_ Lot Dimensions \_\_\_\_\_  
 Lot Area \_\_\_\_\_ FRSB \_\_\_\_\_ 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 Gene Sipes Date 8-12-04



Brent Arndt

800 686 3011 x0852

City of Napoleon Inspection Form

Permit #002326

Date Issued: 08-13-2004

Job Location: 718 ERIE ST

Owner: MILLER, CAROLYN

Owner Phone: 13375

Contractor:

Contractor Phone:

Work Description: EL

Plumbing: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

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

Mechanical: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

FURNACE REPLAC \_\_\_\_\_ AIR COND \_\_\_\_\_

Electrical: UNDGR \_\_\_\_\_ RGHIN 8-24 FINAL \_\_\_\_\_

SEVR UPGR 8-26

Building: Site \_\_\_\_\_ FTG \_\_\_\_\_ FNDDT \_\_\_\_\_

STRU \_\_\_\_\_ ROOF \_\_\_\_\_ EXT \_\_\_\_\_

VENT \_\_\_\_\_ ACCES \_\_\_\_\_ EGRS \_\_\_\_\_

SMKDT \_\_\_\_\_ FINAL \_\_\_\_\_

ISSUE TEMP OCCUP \_\_\_\_\_ ISSUE OCCUP \_\_\_\_\_

STGE Shed: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

Sign: FTG \_\_\_\_\_ FINAL \_\_\_\_\_

Fence: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

DRIVEWAY: \_\_\_\_\_ SIDEWALK: \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES:

INSPECTORS INITIALS: BNA

Sullivan  
Sylvan

