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: 1007 DATE ISSUED: 02-21-02 ISSUED BY: BND

JOB LOCATION: 533 HIGH ST EST. COST: 3901.00

LOT #: SUBDIVISION NAME:

OWNER: WELLS, MATTHEW
ADDRESS: 533 HIGH ST
CSZ: NAPOLEON , OH 43545
PHONE: 419-592-0676

AGENT: ERIE CONSTRUCTION MI
ADDRESS: 4271 MONROE ST
CSZ: TOLEDO, OH 43606
PHONE: 419-472-4200

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
REPLACING 4 WINDOWS

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		45.00

PAID
FEB 28 2002
CITY OF NAPOLEON

TOTAL FEES DUE 45.00

DATE

APPLICANT SIGNATURE

[illegible]

DEPT OF BUILDING
[illegible] N. MCKINLEY AVE
BARNESVILLE, OHIO 43713

DIVISION OF BUILDING & ZONING
PH (614) 584-5010
FAX (614) 584-6193

PERMIT NO: 1007 DATE ISSUED: 02-27-02 EXPIRES ON: 8MO

JOB LOCATION: 531 HIGH ST ✓ BRY GENRY 19031.00

LOT #: SUBDIVISION NAME:

OWNER: WELLS, MATTHEW ADDRT: <DIX CONSTRUCTION NI
ADDRESS: 985 HIGH ST ADDRESS: 4071 MONROE ST
CITY: NAPOLEON OH 43545 CITY: BOLEDO, OH 43606
PHONE: 419-592-0079 PHONE: 419-473-5500

DOC TYPE - RESIDENTIAL: OTHER:

ZONING INFORMATION

DIST: LOT SIZE: AREA: FYND: RTNO: RTNO:
MAX HT: # PKG SPACES: # LOADING SPC: MAX LOT COVE

ROADS OF ZONING APPEALS:

WORK TYPE - NEW: REPLACE/ 2 ADD'N: ALTER: REMODEL:

WORK DESCRIPTION

SIZE - LENT: WIDTH: DEPTH: LIVING-AREA SQ:
GARAGE AREA SQ: HEIGHT: BLDG VOL NEW FIGHT:

WORK DESCRIPTION
REPLACING 4 WINDOWS

FEE DETERMINATION PAID DATE FEE AMOUNT DUE

BUILDING PERMIT 40.00

CITY OF NAPOLEON
FEB 28 2002

TOTAL FEES DUE 40.00

DATE APPLICANT SIGNATURE

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 2-18-02 JOB LOCATION 533 High Street.

LOT # _____ SUBDIVISION NAME _____

OWNER Matthew + Carrie Wells PHONE 419-592-0676

OWNER ADDRESS 533 High Street. CITY Napoleon ZIP 43545

CONTRACTOR Erie Construction PHONE 800-469-1353

CONTRACTOR ADDRESS 5247 Secor Rd. #9 CITY Toledo ZIP 43623

CONTRACTOR FAX # 419-480-1337 CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: To Install -4- Techweld 7000 Windows,

ESTIMATED COST OF WORK TO BE PERFORMED: 3,901.00

WORK INFORMATION NA

BUILDING: Basement Floor Area _____ Sq. Ft. 1st Story Living Area _____ Sq. Ft.

NA 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 [signature] (agent) Date 2-18-02

M992615 010

YOUR LICENSE MUST BE DISPLAYED IN A PROMINENT PLACE. REVERSE SIDE OF LICENSE CONTAINS IMPORTANT INFORMATION.

JOHN ENGLER
GOVERNOR

K 071731

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES

RESIDENTIAL BUILDERS' AND
MAINTENANCE & ALTERATION CONTRACTORS' BOARD

BRANCH OFFICE
LICENSE

MAIN OFFICE IDENTIFICATION NUMBER: 2102110984

ERIE CONSTRUCTION MID-WEST INC
6810 S CEDAR SUITE 10
LANSING MI 48911

PERMANENT I.D. NO.	EXPIRATION DATE	
2106111513	05/31/2002	5287591

THIS DOCUMENT IS DULY ISSUED UNDER THE LAWS OF THE STATE OF MICHIGAN.

Federal ID# - 34-1712631
Workers Comp Ins. Co. - CNA Ins. Co.
Mesc employer # - 11888249
Residential Builders Lic# - 2106111513

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1007

DATE ISSUED: 02-21-2002

JOB LOCATION: 533 HIGH ST

OWNER: WELLS, MATTHEW

OWNER PHONE:419-592-0676

CONTRACTOR: ERIE CONSTRUCTION MID WEST INC

CONTRACTOR PHONE:419-472-4200

WORK DESCRIPTION: REPLACING 4 WINDOWS

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: _____

ERIE construction MID-WEST, INC.

[ ] 154 Potomac Ave., Ste. B • Tallmadge, Ohio 44278 • (330) 633-2110
[ ] 820 Freeway Drive North • Columbus, Ohio 43229 • (614) 785-0207
[ ] 8543 North Dixie Hwy. Dr • Dayton, Ohio 45414 • (513) 898-4688
[X] 4271 Monroe Street • Toledo, Ohio 43606 • (419) 472-4200
Customer Service 1-800-684-4628

A00046

THIS AGREEMENT, made and entered into between Matthew G Wells & Carlie A Wells, (OWNER) and Erie Construction Mid-West, Inc. (CONTRACTOR), who agrees to furnish all labor and material necessary to perform the work hereinafter set forth on the premises of the Owner located at 533 High Street Street, in the City of Napoleon, State of OH Zip Code 43545 Telephone No. 419-592-0676 County/Township Henry.

SPECIFICATIONS

(1) Erie to Furnish and install 4 techwelD 2000 windows. (2) windows to be white in/out (3) All windows to include RTR 10 (4) 2 windows to include colonial Grids in Each sash (5) Erie to remove 4 wood windows (6) Deluxing to Be Done At Later time For 20% off price (7) Price includes tax, permits, warranties, installation, clean up, AND Haul away of Job Debris (8) Same Savings For 36 months on All work still needed to Be Done.

2. **PAYMENT TERMS:** In consideration of the labor and materials and repair, if any, furnished by said Contractor, the Owner agrees to pay to the Contractor:
   A. Cash payment in full upon completion ..... $ _____ ; or
   B. Contract Price, including tax ..... $ 3,901 to Be Financed
   Down Payment $ 0
   Unpaid balance 3,901
   Finance charges _____ Annual Interest Rate _____ %
   Total time balance _____
   Payable in _____ consecutive monthly installments of $ _____ each.
   C. If full price for all contract work is not to be paid in cash, then this Contract is subject to financing approval.
   D. Installation is subject to production scheduling, weather conditions and related factors.

1. IT IS HEREBY UNDERSTOOD AND AGREED THAT THE UNPAID BALANCE OF CASH PRICE OR THE BANK COMPLETION CERTIFICATE MUST BE PAID TO THE SELLER'S INSTALLER AT THE TIME THE WORK IS COMPLETED.

3. Owner hereby warrantys that he is the owner and holder of the title of the above premises.

4. **DEFAULT IN PAYMENT UPON COMPLETION:** If I fail to pay the full amount of the UNPAID BALANCE OF CASH PRICE at the time the work is completed, you shall send this Contract and my obligations to your attorney for collection and enforcement for action and collection. If you do so, **and only if permitted by applicable state law,** I agree to pay, in addition to all other sums due under this Contract **and only which may be collected in accordance with applicable state law,** reasonable attorney's fees in an amount not exceeding FIFTEEN (15) PERCENT of the unpaid amount then owing, and court costs and fees incurred by you in enforcing this Contract.

5. **DELAYS:** I agree that you shall not be liable for delays caused by strikes, weather conditions, delays in obtaining materials or other causes beyond your control.

6. **SALVAGE VALUE:** I agree and acknowledge that the windows, woodwork, siding, brick and all other materials removed by you for this installation have no salvage value. When you remove them, you can have them for whatever purpose you want.

7. All wood needs to be painted or stained by customer.

8. **MATERIALS:** The Contractor shall furnish materials for the work and complete the work to be done in a substantial and workmanlike manner. All workmanship guaranteed for one (1) year only. The undersigned further agree that title in and to any and all materials furnished by Contractor, whether attached to the building or not, shall remain with Contractor until the full amount due from the Owner shall be paid. Windows are not guaranteed against condensation. All unused materials shall, under any conditions, remain the property of Contractor. All material delivered by the Contractor to above premises, shall be stored and safely kept by the Owner and no rental or storage charges therefore shall be made or assessed by Owner.

9. **ALTERATIONS:** Any alteration or deviation from the above specifications involving extra costs will be executed only upon written orders and will become an extra charge.

10. **WARRANTIES:** The Contractor shall not be responsible for damage or delay resulting from an Act of God, riots, civil commotions or disorders, delays or defaults by carriers or inherent defects in premises on which work is to be done, strikes, fires, accidents, storms or other causes beyond the reasonable control of contractors.
There are no representations, guarantees or warranties, except such as herein incorporated, and except manufacturer guarantees, if any, nor any agreements collateral hereto, nor is this contract dependent upon or subject to any condition not herein stated. Any subsequent agreement in reference hereto shall be binding only if in writing and signed by all parties.

11. **CANCELLATION:** You may cancel this Agreement or purchase by mailing a written notice to the seller post-marked not later than midnight of the third business day after the date this Agreement was signed.
It is agreed that if Owner cancels this Contract AFTER THREE (3) DAYS from date of acceptance and before commencement of work, through no fault of the Contractor, then the liquidated damages arising from costs and expenses necessarily incident to the business of the Contractor in connection with this Contract, shall be a sum equal to 25% of the total contract price, or the actual cost of materials purchased by the Contractor to the date of cancellation, whichever is greater; which sum the Owner undertakes and agrees to pay forthwith. All notice hereunder shall be in writing to the contractor.

12. **INSURANCE - OWNER:** During the period of this Contract, Owner shall keep the above described premises and improvements at all times adequately insured against loss by fire, vandalism and malicious damage, and other hazards customarily insured against under the same circumstances, in a reliable insurance company, such insurance payable to parties having an insurable interest in said premises as their interest may appear.

13. **ARBITRATION:** In the event any dispute shall arise between the parties to this Contract as to the respective duties, right and liabilities, thereunder, it is hereby agreed that such disputes shall be referred to the Better Business Bureau of Toledo, Inc. for arbitration, and the decision of the arbitrators shall be final and binding on said parties. Verbal understandings and agreements with representative shall not be binding.

14. **COMPANY APPROVAL:** This Contract is subject to written approval by an officer of the Contractor Company. Said written approval will not be necessary if work is actually commenced by the Contractor.

15. Owners acknowledge receipt of True Copy of this Contract.

IN WITNESS WHEREOF, the Owner and the Contractor have caused these presents to be signed this Date 09, Month 12, Year 02.

Contractor
By [signature] / Tony J.
Sales Representative

APPROVED ON _____

By: _____
Name - Office Held

[signature]
Owner

[signature]
Owner

WD - 100P

E. C. Mid-West Window & Door Estimate Sheet

JOB NUMBER	LEAD SOURCE	MEASURE DATE	ORDER DATE	SPECIAL INSTRUCTIONS
		2/14/02		

CUSTOMER	ADDRESS	CITY & STATE	PHONE	BEST TIME TO CALL
Wells	533 High ST	Napoleon Ohio	(419) 592-0676	PM

NUMBER PRIME WINDOWS	NUMBER STORM WINDOWS	NUMBER PRIME DOORS	NUMBER STORM DOORS	NUMBER SLIDING GLASS DOORS	BAY-MANUF	MEASUREMENT	TYPE ROOF	TYPE WOOD	COIL # OF — COLOR —
4									

NUMBER STOOLS	TYPE OR COLOR OF STOOL	NUMBER I & O STOPS	MULLION REMOVAL	MULLION INSTALLATION	BOW-MANUF	MEASUREMENT	KNEE BRACES	NUMBER OF LITES	CAULK # OF 6 COLOR WHITE

EXISTING WINDOW	MANUFACTURER OF WINDOW	CASING CAPS	SCREENS 1/2 X FULL	ENGINEER'S USE	WINDOW COLOR (WHITE) BROWN TAN
Wood	Unknown	—			

WINDOWS NUMBER	CODE	OPENING SIZE	U.I.	ROOM	MULL REM	CAPS	O B S or E S	GLAZING SIN INS	I & O	STOPS	STOOLS WOOD OR MARBLE	GRIDS
101	D/H	32X62	92	Kid's Bed		All windows are white						
102	↓	32X60	92	↓		in + white out insulate						
103	↓	↓	92	↓		cavities All glass						
104	↓	↓	92	↓		is RIOTK						

No Deluxe

NO.	MULL	WDW TYPE	LT	SCR TYPE	OVERALL W	OVERALL H	GLASS TYPE	MUNT TYPE	STOPS I	STOPS O	REMARKS
1		DH	2	H	32	60 3/4	RIO				
2		DH	2	H	32	60 3/4	RIO				
3		DH	2	H	32	60 3/4	RIO				
4		DH	2	H	32	60 3/4	RIO				
5											
6											
7											
8		☆	1	PC	WHITE HEADCAP						
9											
10		☆	1	PC	WHITE SILL ANGLE						
11											
12		☆	#1+2 TO HAVE COLONIAL								
13			GRIDS BOTH SASHES								
14											
15											
16											
17											

DOORS NUMBER	CODE	OPENING SIZE	HINGE RIGHT	HINGE LEFT	DESCRIPTION

(Toledo) Lansing Dayton Grand Rapids Fort Wayne Akron Traverse City Roanoke Port Huron

Job # A00046 Factory Order # _____