

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT
 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01542 Issued 5-3-88 date
 Job Location 1140 Highland address
 Lot: 19 HIGHLANDS 2ND ADD sub-div or legal discript
 Issued By Eldon Huber (NSJ) building official
 Owner Cathy M. Cupp 592-1308 name tel.
 Address Same
 Agent Self builder-eng.-etc. tel.
 Address Same
 Description of Use Residence
 Residential 1 no. dwelling units
 Commercial _____ Industrial _____
 New _____ Add'n. _____ Alter _____ Remodel X
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 400.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00		9.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			9.00
LESS MIN. FEES PAID			
BALANCE DUE.....			

ZONING INFORMATION N.A.

district	lot dimensions		area	front yd	side yds	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr	

WORK INFORMATION: N.A.

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.
 Electrical: N.A. brief description _____
 Plumbing: N.A. brief description _____
 Mechanical: N.A. brief description _____
 Sign: N.A. Dimensions _____ Sign Area _____
 Additional Information: Re-roof existing car port.

PAID

MAY 02 1988

Date _____ Applicant Signature _____ owner-agent

CITY OF NAPOLEON

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT
 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01542 Issued _____ date _____
 Job Location 1140 HIGHLAND address _____
 Lot _____ sub-div or legal discript _____
 Issued By ELDON HUBER STJ building official
 Owner CATHY M. CUPP 592-1308 name tel.
 Address SAME
 Agent SELF builder-eng.-etc. tel. _____
 Address SAME
 Description of Use RE-ROOF
EXISTING CAR PORT
 Residential 1 no. dwelling units
 Commercial _____ Industrial _____
 New _____ Add'n. _____ Alter _____ Remodel X
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 400.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	<u>9.00</u>	—	<u>9.00</u>
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			<u>9.00</u>
LESS MIN. FEES PAID <u>4/29/88</u> date			<u>9.00</u>
BALANCE DUE.....			<u>0</u>

ZONING INFORMATION N/A

district	lot dimensions	area	front yd	side yds	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION: N/A

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.
 Electrical: N/A brief description _____
 Plumbing: N/A brief description _____
 Mechanical: N/A brief description _____
 Sign: _____ type _____ Dimensions _____ Sign Area _____
 Additional Information: Re-Roof Existing Car Port
 Date _____ Applicant Signature _____ owner-agent _____

PAY-IN ORDER

CITY OF NAPOLEON

Nº 9058

5-2, 1988

Received of Cathy M. Cupp

PAY TO THE TREASURER OF SAID CITY

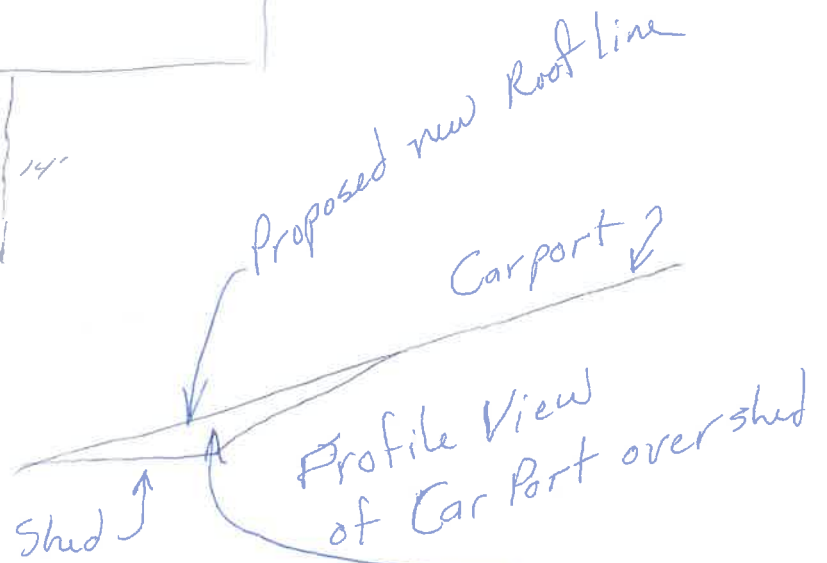
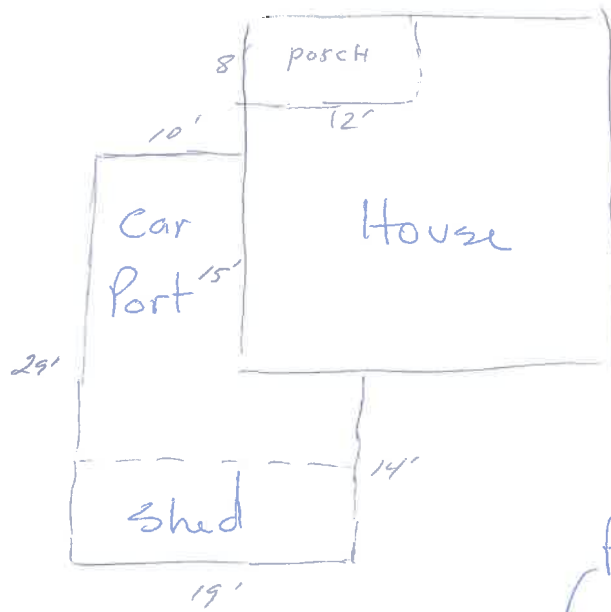
Nine and ⁰⁰/₁₀₀ DOLLARS, \$ 9. —

For Building 9 - Permit 01542

which amount is to be placed to the credit of _____ Fund

R. W. Schweinhagen
CLERK-TREASURER

1140 Highland



Will redo the Roof over Carport & Shed

4-29-88

Permit is Ok to

Issue - She will
pick up Monday

ROF

will fill in
These areas
with new 2x6s

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR BUILDING PERMIT
(Please print or type)

The undersigned hereby makes application for construction, installation, or alteration work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 1140 Highland Cost of project 400.00
Owner's Name Cathy M. Cupp Address 1140 Highland
Contractor SELF Telephone No. 592-1308
Address N/A

Lot Information: (Not required for siding job)

Lot No. 19 Subdivision SECOND Highland Addition
Zoning District A Lot Size 55 ft. X 128 ft. Area _____ sq. ft.
Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential X Commercial _____ Industrial _____
New Construction _____ Addition _____ Remodel X
Accessory Building _____ Siding _____
(Specific Type)

Brief Description of Work:-----

RE-ROOF ~~A~~ EXISTING CAR PORT + ~~FRONT PORCH~~

Size: Length _____ Width _____ No. of Stories _____
Area: 1st Floor 1284 sq. ft. Basement _____ sq. ft.
2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.
3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date _____ Applicant's Signature Cathy M. Cupp

PERMIT NO. _____
PERMIT FEE \$ _____

REQUEST TO HELP BEAUTIFY NAPOLEON, OHIO, BY REQUESTING
CERTAIN AREAS TO BE MOWED OR CLEANED-UP

REQUESTING PARTIES NAME: Maryann Walden
ADDRESS: 1134 Highland Ave
Napoleon OH
PHONE NUMBER: 592-9920

ADDRESS OF LOCATION OF PROPERTY TO BE MOWED OR CLEANED-UP:

→ 1140 Highland - Vacant

NATURE OF REQUEST:

Rats at this house

PROPERTY OWNERS NAME: Cathy Capp
PROPERTY OWNERS ADDRESS: 1140 Highland
830 W. Clinton
PROPERTY OWNERS PHONE NUMBER (IF KNOWN): 592-1250

Per Karen -

Cathy owns the home @ 1140 Highland
but lives @ 830 W Clinton. Sandy

Called 10-8-01 - 3:56 PM

She said she would get more rat poison and
set it out.

BND

