

MONDAY

W. A. KLINGER, INC.  
CONSTRUCTOR  
2015 E. SEVENTH ST.  
P.O. BOX 6800  
SIOUX CITY, IOWA 51102

PHONE (712)277-3900  
FAX (712)258-5528

4/24/98

TO: CITY OF NAPOLEON

BUILDING + ZONING

255 W. RIVERVIEW AVE

NAPOLEON OHIO

ATTN: BRENT DAMMAN

RE: CLOVERLEAF

43545-0151

FREEZER ADDITION

JOB # \_\_\_\_\_

Gentlemen:

We are enclosing \_\_\_\_\_

4

prints of:

Sheet # CI

From: \_\_\_\_\_

WAK

RE: SITE PLAN 4/8/98

Sheet # 1, 1, S1-S3

From: \_\_\_\_\_

WAK

RE: FLOOR PLAN, END 4/15/98

Sheet # \_\_\_\_\_

From: \_\_\_\_\_

RE: \_\_\_\_\_

Sheet # \_\_\_\_\_

From: \_\_\_\_\_

RE: \_\_\_\_\_

These prints are:

1.  For \_\_\_\_\_ approval. Please return \_\_\_\_\_ corrected prints.
2.  For revision and return to us. Please return \_\_\_\_\_ corrected prints.
3.  Approved as noted \_\_\_\_\_. Please return \_\_\_\_\_ corrected prints for job and office use.
4.  For file and distribution.
5.  For job use. YOUR REVIEW

Remarks:

BRENT-

CONTRACTORS REGISTRATION INFO

IS COMING SHORTLY

Thanks

W. A. KLINGER, INC.

By: Steve Kog

Member



SKILL  
INTEGRITY  
RESPONSIBILITY

BUILD TO ENDURE

W.A. KLINGER, INC.  
CONSTRUCTOR  
2015 E. SEVENTH ST.  
P.O. BOX 8800  
SIOUX CITY, IOWA 51102

PHONE (712) 277-3900  
FAX (712) 277-5300

7/2/98

TO: CITY OF NAPOLEON  
Box 151  
NAPOLEON OHIO 43545

ATTN: BRENT DAMMAN

RE: CLOVERLEAF

JOB # \_\_\_\_\_

Gentlemen:

We are enclosing CHECK prints of: FOR ZONING FEE

Sheet # \_\_\_\_\_ From: \_\_\_\_\_ RE: \_\_\_\_\_

Sheet # \_\_\_\_\_ From: \_\_\_\_\_ RE: \_\_\_\_\_

Sheet # \_\_\_\_\_ From: \_\_\_\_\_ RE: \_\_\_\_\_

Sheet # \_\_\_\_\_ From: \_\_\_\_\_ RE: \_\_\_\_\_

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5.  For job use.

Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*W.A. Klinger*

W.A. KLINGER, INC.

By: Stew Keya



BUILD TO ENDURE

**CITY OF NAPOLEON, OHIO  
STORMWATER ABATEMENT CREDIT APPLICATION**

SERVICE ADDRESS: <u>1165</u> <u>INDEPENDENCE DR</u> STREET NUMBER STREET NAME	ACCOUNT NUMBER: 99* 17700*1 99* 17800*2
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SERVICE CLASS:  RESIDENTIAL  COMMERCIAL  INDUSTRIAL      DATE: 06/13/07

ARE YOU THE OWNER:     YES     NO    IF NO, COMPLETE PROPERTY OWNER & TENANT INFORMATION BELOW  
 IF YES, COMPLETE PROPERTY OWNER INFORMATION BELOW

Tenant	Property Owner
NAME: (LAST, FIRST, MIDDLE INITIAL)	NAME: (LAST, FIRST, MIDDLE INITIAL)
ADDRESS: (IF DIFFERENT FROM SERVICE ADDRESS)	ADDRESS:
CITY, STATE, ZIP:	CITY, STATE, ZIP:
HOME PHONE:      WORK PHONE:	HOME PHONE:      WORK PHONE:

ARE YOU APPLYING FOR A COMMERCIAL/ INDUSTRIAL CREDIT (RETENTION & DETENTION) OR ARE YOU CHALLENGING THE E.R.U. CALCULATION FOR THIS ACCOUNT? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE COMPLETE THIS BLOCK)  Total Area of Property/Lot: _____ s.f.  Impervious Area: _____ s.f. (ATTACH DRAINAGE & DETENTION CALCULATIONS)	ARE YOU APPLYING FOR RESIDENTIAL MULTIPLE LEVEL UNIT CREDIT? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE COMPLETE THIS BLOCK)  MULTI-LEVEL BUILDING* <input type="checkbox"/> YES <input type="checkbox"/> NO BUILDING USE: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL  * Multi-level residential units where there are separate residents on multiple levels are eligible for up to 50% credit.  * Multi-level single family residents are <b>NOT</b> eligible.
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Additional Information: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

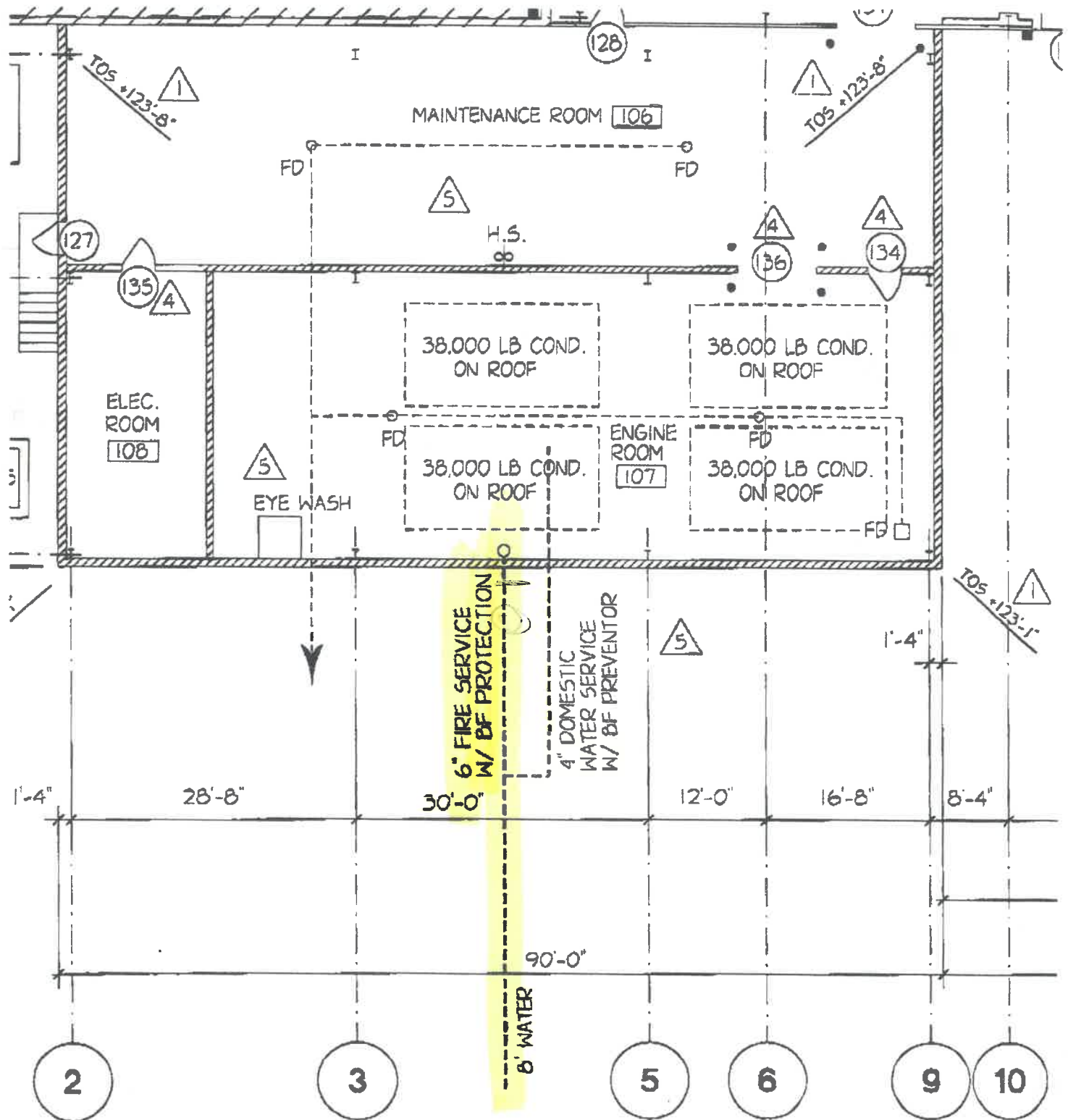
Signature \_\_\_\_\_      Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 APPLICANT

**FOR CITY USE ONLY:**

E.R.U. \_\_\_\_\_ NO CHARGE - SECONDARY METERS  
 Credit\* \_\_\_\_\_ %  
 E.R.U. Credit: \_\_\_\_\_ (If zero, see explanation below.)  
 Net Billable E.R.U. \_\_\_\_\_

APPROVED      EFFECTIVE DATE: 04/13 /2007  
 DENIED (EXPLANATION ATTACHED IF APPLICABLE)  
[Signature] \_\_\_\_\_      Date 06/13/07  
 CITY ENGINEER

\*\*RETURN COMPLETED APPLICATION TO ENGINEERING DEPARTMENT\*\*



OVERNITE

W.A. KLINGER, INC.  
CONSTRUCTOR  
2015 E. SEVENTH ST.  
P.O. BOX 8800  
SIOUX CITY, IOWA 51102

PHONE (712) 277-3900  
FAX (712) 277-5300

5/22/98

TO: CITY OF NAPOLEON  
BUILDING + ZONING  
255 W. RIVERVIEW AVE  
NAPOLEON OHIO 43545-0151

ATTN: BRENT DAMMAN

RE: CLOVERLEAF FREEZER  
ADDITION

JOB # \_\_\_\_\_

Gentlemen:

We are enclosing 1 SIGNED 3 COPIES prints of:

Sheet # <u>COVER PAGE</u>	From: <u>WAK</u>	RE: _____
Sheet # <u>C.1</u>	From: _____	RE: <u>SITE PLAN</u>
Sheet # <u>1.1, 2.1, 3.1</u>	From: _____	RE: <u>PLANS/ELEV</u>
Sheet # <u>4.1, 4.2, 4.3, 4.5</u>	From: <u>S1 S2 S3</u>	RE: <u>SECTIONS, FNS</u>

5/22/98  
5/22/98  
5/1/98

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Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

thanks  
W.A. KLINGER, INC.

By: [Signature]



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