

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: 97241

DATE ISSUED: 07-07-97

ISSUED BY: MBS

JOB LOCATION: 470 INDEPENDENCE DR

EST. COST: 800.00

LOT #:

SUBDIVISION NAME:

OWNER: SOCIETY FOR THE HANDICAPP
ADDRESS: 470 INDEPENDENCE DR
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-0951

AGENT: SHEPARD DESIGN
ADDRESS: P.O. BOX 21
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-1026

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: X REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

DEPTH - LGTH: 4 WIDTH: 14'10" STORIES: LIVING AREA SF:
PAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

TWO SIGNS ATTACHED TO FACE OF BUILDING

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

SIGN PERMIT

37.80

TOTAL FEES DUE 37.80

7/7/97

DATE

Robert J. [Signature]

APPLICANT SIGNATURE



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 97241

DATE ISSUED: 07-07-97

JOB LOCATION: 470 INDEPENDENCE DR

OWNER:

OWNER PHONE: 419-599-0951

CONTRACTOR: SHEPARD DESIGN

CONTRACTOR PHONE: 419-592-1026

WORK DESCRIPTION: TWO SIGNS ATTACHED TO FACE OF BUILDING

PLUMBING: UNDGR _____ RGHIN _____ FINAL _____

 SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

 FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

 SERV UPGR _____

BUILDING: SITE _____ FTG _____ FNDDT _____

 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: _____