

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: 99350 DATE ISSUED: 09-29-99 ISSUED BY: MBS
JOB LOCATION: 1310 LAGRANGE ST EST. COST: 9000.00

LOT #: SUBDIVISION NAME:
OWNER: BELL, RICHARD AGENT: TRIM A HOME INC
ADDRESS: 1310 LAGRANGE ST ADDRESS: 212 MARCIAL DR
CSZ: NAPOLEON, OH 43545 CSZ: PORT WAYNE, IN 46825
PHONE: 419-592-0746 PHONE: 219-471-5210

USE TYPE - RESIDENTIAL: OTHER:

ZONING INFORMATION

DIST: R-2 LOT DIM: AREA: FYRD: 30 SYRD: 7 RYRD: 15
MAX HT: 40 # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: REPLMNT: ADD'N: X ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

PATIO ROOM AND DECK ADDITION

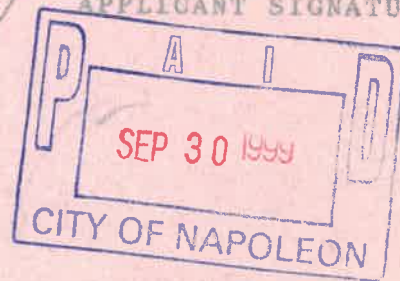
FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		55.00

TOTAL FEES DUE 55.00

9-30-99

DATE

James H. Coz
APPLICANT SIGNATURE



CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE Sept 23, 1999 JOB LOCATION 1310 LA Grange St

LOT # _____ SUBDIVISION NAME _____

OWNER Richard Bell PHONE 419-592-0746

OWNER ADDRESS 1310 LA Grange CITY Napoleon ZIP 43545

CONTRACTOR TRIM-A-Home, Inc. PHONE 219-471-5210

CONTRACTOR ADDRESS 212 Marciel St CITY Fort Wayne, Ind ZIP 46825

CONTRACTOR FAX # 219-471-5540 CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: 3 Season Patio Room 16'10" X 12'9"
Alum Railing on Wood Deck.

ESTIMATED COST OF WORK TO BE PERFORMED: 11,436.00

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 _____ 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 _____

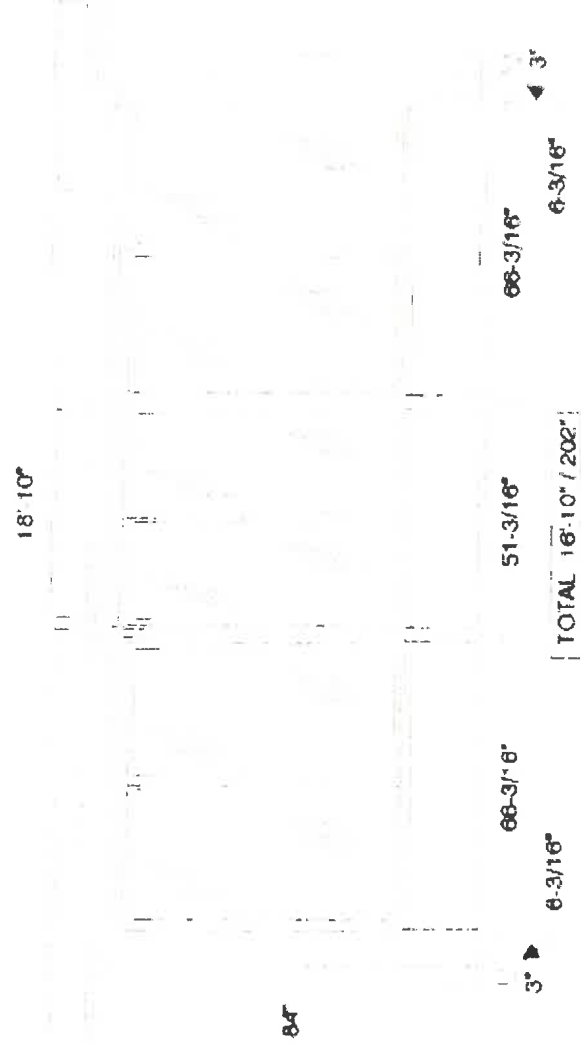
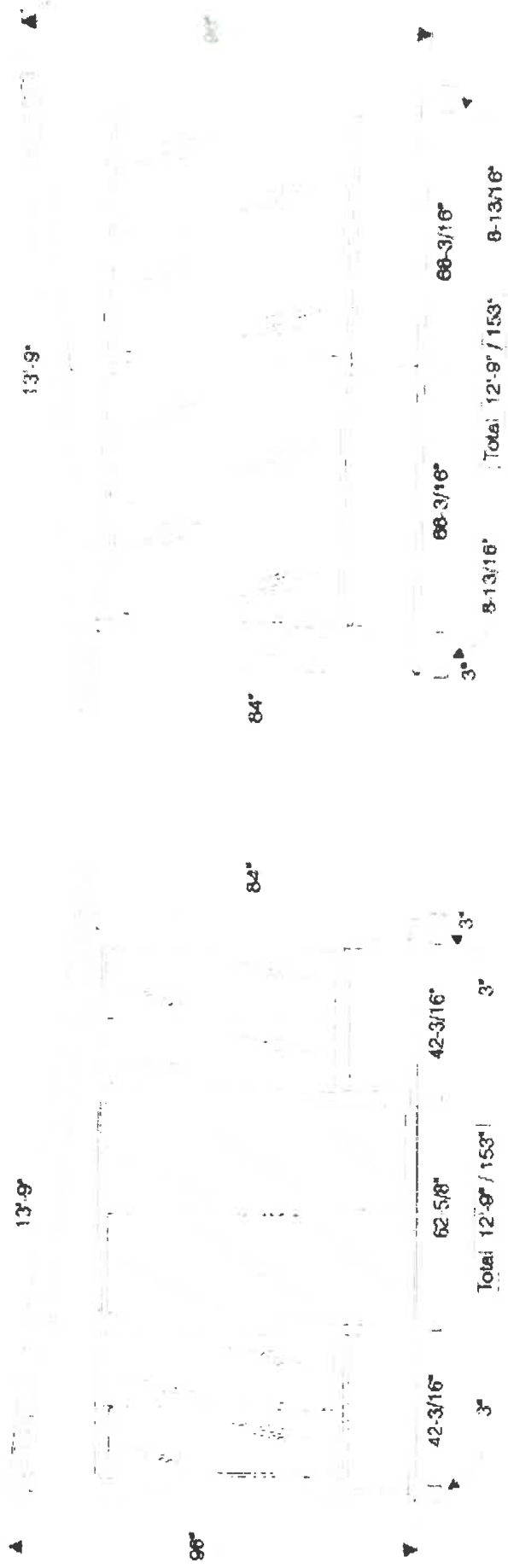
Insulation Contractor _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

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 James L. Samuel Date Sept 23, 1999



TRIM A - HOME

Full View Enclosure
 Size - 12'-9" x 16'-10" x 12'-9"
 Extrusion - White
 Panels - White
 Glass - Standard Tempered

All Season Patio Cover
 Size - 13'-9" x 18'-10"
 Color - White

M/F Ball 9 / 3 / 99

This Enclosure has been laid out as a request by your company. Urban Industries assumes no liability for any kind of code compliance.

