

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Plumbing Permit

Permit Number: PL2007-31

Page 1 of 2

Printed: 8/28/2007

ADDRESS:

1353 Lynne Ave.

Applicant

Name: Oakridge Builders

Address: Q774 Co Rd 15A

Approval Date: 8/28/2007

419-599-8422

Owners

Name: Westmoreland Villas

Address: 8245 St Rt 6

Napoleon, OH 43545

Phone: 419-599-8422

Contractors

Contractor Type: Other

Name: Moore's Plumbing

Address: O-829 Co Rd 11C

Napoleon, OH 43545

Phone: 419-599-1993

Contractors

Contractor Type: Builder

Name: Oakridge Builders

Address: Q774 Co Rd 15A

Napoleon, OH 43545

Phone: 419-599-8422

Fees and Receipts:

Number	Description	Amount
FEE2007-470	PLUMBING (Auto)	\$39.00
FEE2007-471	State 1% fee (Calc)	\$0.39

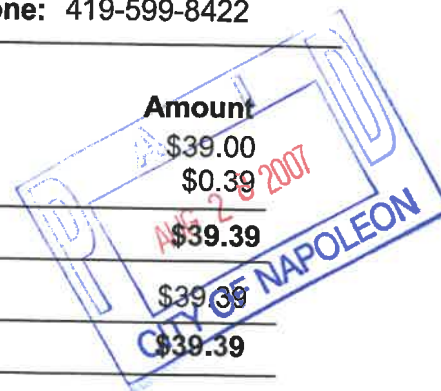
Total Fees:

\$39.39

RCPT2007-377

Total Receipts:

\$39.39



new condo

APPLICANTS SIGNATURE: _____

DATE: _____

NEW HOME AND ADDITION PERMIT APPLICATION

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

DATE _____ JOB LOCATION 1353 Dupont

LOT # _____ SUBDIVISION NAME _____

OWNER Westmoreland Villas PHONE _____

OWNER ADDRESS _____ CITY _____ ZIP _____

CONTRACTOR - Oakridge Builders PHONE 599-8422

CONTRACTOR ADDRESS _____ CITY _____ ZIP _____

CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: New Condo

ESTIMATED COST OF WORK TO BE PERFORMED: 150,000⁰⁰

WORK INFORMATION

BUILDING: Basement Floor Area 1400 Sq. Ft. 1st Story Living Area 1400 Sq. Ft.

2nd Floor Living Area _____ Sq. Ft. Garage Floor Area 500 Sq. Ft.

BUILDING SIZE: Length _____ Width _____ Stories _____ Height _____ DEMO VOL _____

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

Electrical Contractor Spieser Jim Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Plumbing Contractor moores Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Heating Contractor moores Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

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

Other Contractor attach information.

ZONING INFORMATION (to be completed by City) : District _____ Lot Dimensions _____
Lot Area 120490 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 _____ Date _____

5/8" meter. \$ 730.40
PL 07-31 39³⁹
MC 07-38 30³⁰ - 3129