

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: 588

DATE ISSUED: 05-10-01

ISSUED BY: MBS

JOB LOCATION: 930 LYNNE AVE

EST. COST:

LOT #:

SUBDIVISION NAME:

OWNER: SAMAN, FRANK
ADDRESS: R394 CO RD 16
CSZ: NAPOLEON, OH 43545
PHONE: 419-598-8787

AGENT: JERRY GLANZ TRENCHIN
ADDRESS: 6 LAKEVIEW DR
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-4103

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

WORK INFORMATION

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

WORK DESCRIPTION

SANITARY SERVICE REPLACEMENT

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

SEWER INSPECTION PER

25.00

TOTAL FEES DUE

25.00

DATE

APPLICANT SIGNATURE

