

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: 232

DATE ISSUED: 07-17-00

ISSUED BY: BND

JOB LOCATION: 421 E MAIN ST

EST. COST: 3697.00

LOT #:

SUBDIVISION NAME:

OWNER: BIELSER, BRENDA  
ADDRESS: 421 E MAIN ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-9809

AGENT: ELLERBROCK HTG & A/C  
ADDRESS: 13055 DOHONEY RD  
CSZ: DEFIANCE, OH 43512  
PHONE: 419-782-1834

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: ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION

FURNACE REPLACEMENT A/C ADD ON

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

MECHANICAL PERMIT  
ELECTRICAL PERMIT

10.00  
6.00

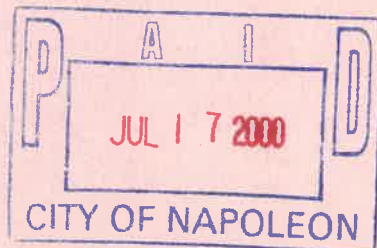
TOTAL FEES DUE 16.00

7-17-2000

DATE

*Ray Ellersbrock*

APPLICANT SIGNATURE



# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 7-17-00 JOB LOCATION 421 E. Main Napoleon OH

LOT # \_\_\_\_\_ SUBDIVISION NAME \_\_\_\_\_

OWNER Brenda Bilser PHONE (419) 592-9809

OWNER ADDRESS Same CITY \_\_\_\_\_ ZIP \_\_\_\_\_

CONTRACTOR Ellerbrock Heating + A/C PHONE (419) 782-1834

CONTRACTOR ADDRESS 13055 Dohoney Rd. CITY Defiance ZIP 43512

CONTRACTOR FAX # (419) 782-7919 CELL PHONE (Opt.) \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: installation of Furnace + A/C

ESTIMATED COST OF WORK TO BE PERFORMED: \$ 3697.

## 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 Ellerbrock Heating + A/C Phone (419) 782-1834 Fax (419) 782-7919  
Address 13055 Dohoney Rd. City Defiance St OH Zip 43512

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 \_\_\_\_\_ Date 7-17-00