

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: 302

DATE ISSUED: 09-06-00

ISSUED BY: BND

JOB LOCATION: 703 W MAIN ST

EST. COST: 1600.00

LOT #:

SUBDIVISION NAME:

OWNER: GABLE, RANDY  
ADDRESS: 220 ORCHARD LN  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-1176

AGENT: BARTELS ELECTRIC INC  
ADDRESS: 13-414 CO RD S  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-2992

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

ELECTRIC SERVICE UPGRADE  
100 OH

FEE DESCRIPTION

ELECTRICAL PERMIT

PAID DATE

FEE AMOUNT DUE

15.00



TOTAL FEES DUE 15.00

9-8-00

DATE

*[Handwritten Signature]*  
APPLICANT SIGNATURE



CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE  
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 302

ISSUED: 09-06-2000

JOB LOCATION: 703 W MAIN ST

WORK DESCRIPTION: ELECTRIC SERVICE UPGRADE

OWNER: GABLE, RANDY

ADDRESS: 220 ORCHARD LN NAPOLEON, OH 43545

OWNER PHONE: 419-599-1176

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CONTRACTOR: BARTELS ELECTRIC INC

ADDRESS: 13-414 GO RD S NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-599-2992

ELECTRIC SERVICE UPGRADE  NEW SERVICE INSTALLATION \_\_\_\_\_

INDUSTRIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ RESIDENTIAL  1PHASE  3PHASE \_\_\_\_\_

SIZE OF SERVICE 100AMP  150AMP \_\_\_\_\_ 200AMP \_\_\_\_\_ 400AMP \_\_\_\_\_ OTHER \_\_\_\_\_

HUB SIZE - 1 1/4"  1 1/2" \_\_\_\_\_ 2" \_\_\_\_\_

DESIRED VOLTAGE 120/240  OTHER \_\_\_\_\_

UNDERGROUND SERVICE \_\_\_\_\_ OVERHEAD SERVICE

=====

DATE COMPLETED: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

OLD METER NUMBER: \_\_\_\_\_ NEW METER NUMBER: \_\_\_\_\_

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





# CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 9-6-00 JOB LOCATION 703 & 705 W. MAIN ST

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

OWNER RANDY GABLE PHONE 599-1176

OWNER ADDRESS 220 ORCHARD LANE CITY NAPOLEON, OH ZIP 43545

CONTRACTOR BARTUS ELECTRIC, INC PHONE 599-2992

CONTRACTOR ADDRESS 13-414 CLS CITY NAPOLEON, OH ZIP 43545

CONTRACTOR FAX # (419) 599-2792 CELL PHONE (Opt.) 392-0509

DESCRIPTION OF WORK TO BE PERFORMED: CHANGE SERVICE PANELS

ESTIMATED COST OF WORK TO BE PERFORMED: 1600<sup>00</sup>

## 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 \_\_\_\_\_ Date \_\_\_\_\_

