

THE CITY OF NAPOLEON
 WATER & SEWER DEPARTMENT

SCANNED

CITY OF NAPOLEON UTILITY DEPARTMENT

Batch Time 14877 02:48PM Sequence 41 Date 17 MAR 2006 Pay type CS
 Account MGMIS Refer
 Name ALAN ARMES Amt Paid 28.00
 Document PERMIT Amt Tend 30.00
 100.3100.46510 28.00 Change 2.00

105 E. Madison Ave
 Napoleon, OH 43545

Contractors Westhoven Builders
Address: 8927 Co Rd P-3
 Napoleon, OH 43545 **Phone** 419-592-7308

Fees and Receipts:

Number	Description	Amount
FEE2006-231	Reroofing/Siding/Gutters (Auto	\$28.00
Total Fees:		\$28.00
RCPT2006-75		\$28.00

Description

Structure Use: **Start Date:**
Construction Value: **End Date:**
Floor Areas: Living Space: Basement/Storage: Garage:

Description of work to be done:

re roofing

03-20-06A09:07 PAID

Applicant signature: _____ **Date:** _____

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 3-17-06 JOB LOCATION: 185 E. Maumee

OWNER: Alan Armes PHONE: 419-599-1685

OWNER ADDRESS: 185 E. Maumee CITY: Nap. ZIP: 43545

CONTRACTOR: Jason Westhoven

PHONE #: 419-966-4242 CELL PHONE#: 419-966-2094

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO:

Is any of the above job going to be subcontracted out? Yes No:

If yes to whom: _____

DESCRIPTION OF WORK TO BE PERFORMED: tear old roof off reflat + six soft spots

ESTIMATED COMPLETION DATE: 3-22-06

PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- | | |
|---|--|
| <input type="checkbox"/> A/C ADD ON | <input type="checkbox"/> REMODELING |
| <input type="checkbox"/> BOILER REPLACEMENT | <input checked="" type="checkbox"/> ROOFING |
| <input type="checkbox"/> CURBING | <input type="checkbox"/> SEWER REPAIRS** |
| <input type="checkbox"/> DECKS * | <input type="checkbox"/> SIDEWALK* |
| <input type="checkbox"/> DRIVEWAY* | <input type="checkbox"/> SIDING |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE | <input type="checkbox"/> STORAGE SHED* |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW | <input type="checkbox"/> SWIMMING POOL* |
| <input type="checkbox"/> FENCE* | <input type="checkbox"/> FURNACE REPLACEMENT |
| <input type="checkbox"/> ADDITIONS* | <input type="checkbox"/> TEMP ELECTRIC |
| <input type="checkbox"/> FURNACE NEW | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER | <input type="checkbox"/> WINDOWS |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ZONING |

*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

** IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE

City of Napoleon

BUILDING & ZONING DEPARTMENT

255 W Riverview

(419)592-4010

F

Inspection Record

Inspection #: INSP2006-77

Page: 1

Printed: 3/24/2006

Address: 185 Maumee Ave. E.
Napoleon, OH 43545

Reference #: BP2006-19

Applicant: Mr. Allan Armes

Directions To Parcel:

Inspection Type: Building Final

Date: 3/21/2006

Inspector: Tom

Status: Approved

Passed?

Required Steps:

Comments:

Inspection Checklist:

Corrections:

Correction Code:

Date:

Correction Description:

Status:

Correction Made Date:

Conditions:

Condition Code:

Description:

Date:

Department:

Status:

Other Fields: