PERMIT

City of Napoleon 255 W. Riverview Napoleon, OH 43545 Division of Building and Zoning

PH (419) 592-4010 FAX (419) 599-8393

Permit No: 002479

Date Issued: 12-06-04

Issued by: MBS

Job Location: 202 MEEKISON ST

Est. Cost: 6000.00

Lot #:

Subdivision Name:

Owner: CARSON, AMANDA Address: 202 MEEKISON

Agent: VONDEYLEN PLBG & HTG-Address: 116 E CLINTON ST

CSZ: NAPOLEON, OH 43545

CSZ: NAPOLEON, OH 43545

Phone: 419-592-0904

Phone: 419-592-4756

Use Type – Residential:

Other:

ZONING INFORMATION

Dist:

Lot Dim:

I

Area:

Fyrd:

Syrd:

Ryrd:

Max HT: # Pkg Spaces:

Loading SP:

Max Lot Cov:

BOARD OF ZONING APPEALS:

Work Type – New:

Replmnt:

Addn'n:

Alter:

Remodel:

WORK INFORMATION

Size - Lgth:

Width:

Stories:

Living Area SF:

Garage Area SF:

Height:

Bldg Vol Demo Permit:

WORK DESCRIPTION BOILER REPLACEMENT

FEE DESCRIPTION MECHANICAL PERMIT

PAID DATE

FEE AMOUNT DUE

10.00

Total Fees Due

10.00

Date

Applicant Signature

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMILITIONS, REMODELING.

DATE: 12-3-04 JOB LOCATION: 202 Meekison.	
OWNER: Amanda Carson PHONE:	
OWNER ADDRESS: 202 Meekism CITY:	polein ZIP: 43545
CONTRACTOR: Von Deylen Plag & Atg Cac PHONE: 592-4756 CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES: NO:	
DESCRIPTION OF WORK TO BE Replace Boiler	
PERFORMED:	
PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING	
_A/C ADD ONRE	MODELING
BOILER REPLACEMENT 10	ROOFING
CURBING	_SEWER REPAIRS
DECKS *	_SIDEWALK*
DRIVEWAY*	SIDING
ELECTRICAL SERVICE UPGRADE	_SIGN
# of new circutsELECTRICAL SERVICE NEW # of circuts	_STORAGE SHED*
FENCE*	_STREET BOND
_ADDITIONS*	_SWIMMING POOL*
FURNACE REPLACEMENT	TEMP ELECTRIC
FURNACE NEW	WATER TAP
_LAWN METER	WINDOWS
PLUMBING	# of windows ZONING
OTHERS:	

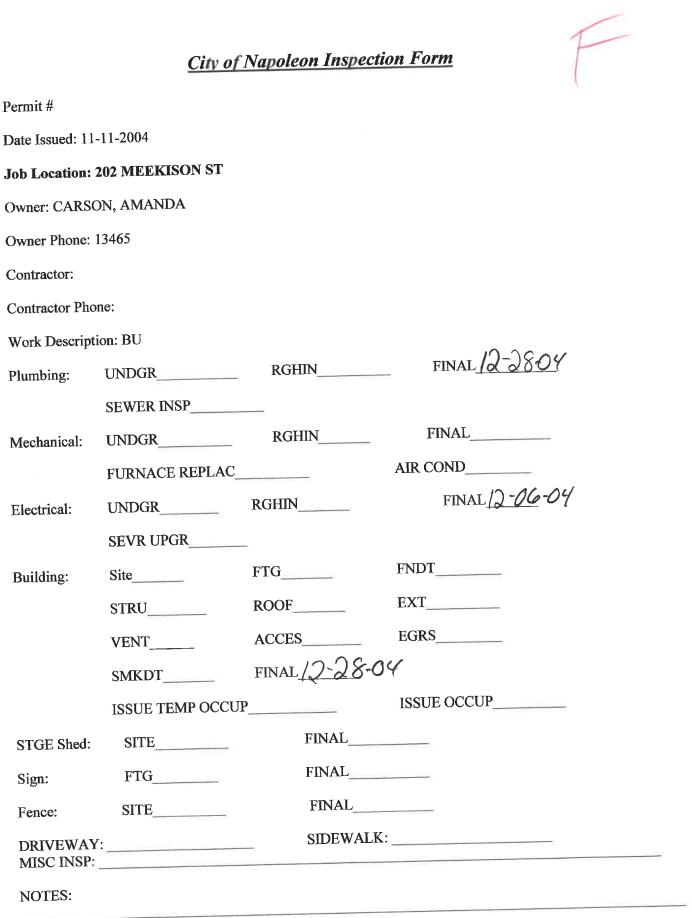
10.00

^{*}PLEASE MAKE A PICTURE ON REVERSE SIDE SHOWING MEASURMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

City of Napoleon Inspection Form

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Permit #002479 Date Issued: 12-06-2004 **Job Location: 202 MEEKISON ST** Owner: CARSON, AMANDA Owner Phone: 13490 Contractor: Contractor Phone: Work Description: ME Plumbing: UNDGR RGHIN FINAL SEWER INSP UNDGR_____RGHIN____ Mechanical: FINAL____ Boiler ELIPPLICE REPLAC (2-30-04) AIR COND UNDGR_____ RGHIN____ Electrical: FINAL____ SEVR UPGR FTG____ Building: Site____ FNDT STRU ROOF EXT____ VENT____ ACCES EGRS SMKDT FINAL ISSUE TEMP OCCUP______ ISSUE OCCUP____ SITE STGE Shed: FINAL____ FTG Sign: FINAL Fence: SITE____ FINAL____ DRIVEWAY: SIDEWALK: ____ MISC INSP: _____ NOTES: INSPECTORS INITIALS: Jam 18



INSPECTORS INITIALS: