

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT
255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 66-79 Issued 6-5-79 date
 Job Location 220 Meekison St. address
 Lot n/a sub-div or legal discript
 Issued By _____ building official
 Owner Eldor H. Miller 592-2282 name tel.
 Address 220 Meekison St.
 Agent Self builder-eng.-etc. tel.
 Address _____
 Description of Use ~~XXXX~~ Vinyl Siding
 Residential one no. dwelling units
 Commercial _____ Industrial _____
 New _____ Add'n. _____ Alter _____ Remodel XX
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 800.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	\$6.00		\$6.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			\$6.00
LESS MIN. FEES PAID _____ date _____			0
BALANCE DUE.....			\$6.00

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION:

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.
 Electrical: _____ brief description _____
 Plumbing: _____ brief description _____
 Mechanical: _____ brief description _____
 Sign: _____ Dimensions _____ Sign Area _____
 Additional Information: CALL FOR FINAL INSPECTION:

Date 6/5/79 Applicant Signature Mildred Miller owner-agent

PAID
 JUN 15 1979
 CITY OF NAPOLEON

629

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR BUILDING PERMIT
(please print or type)

The undersigned hereby makes application for construction, installation, or alternation work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project _____ Cost of Project \$800.00

Owner's Name Eldon H. Miller Address 220 Madison St

Contractor Eldon H. Miller Telephone No. 5922282

Address _____

Lot Information: (not required for siding job)

Lot No. 9 Subdivision J.G. LOWES 1st ADDN.

Zoning District _____ Lot Size _____ ft X _____ ft. Area _____ sq. ft.

Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential _____ Commercial _____ Industrial _____

New Construction _____ Addition _____ Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: Vibron Siding Specific Type _____

Size: Length _____ Width _____ No. of Stories _____

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Building _____ sq. ft.

3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: _____

*APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 6-11-79 Applicant's Signature Eldon H. Miller

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