

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 16-79 Issued 3-20-79
date

Job Location 1150 Michigan Ave,
address

Lot 8 Bockelmans 2nd
sub-div or legal discript

Issued By *R. Johnson*
building official

Owner Clarence Schwab Jr. 592-4901
name tel.

Address 1150 Michigan Ave.

Agent Self
builder-eng.-etc. tel.

Address _____

Description of Use New footer tile & brick
vener.

Residential one
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel XX

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 8,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING			0
<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.....			0
LESS MIN. FEES PAID _____			0
			0
BALANCE DUE.....			0

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 _____
type

Additional Information: Call for inspection of footer tile and sewer tap.

Date _____ Applicant Signature _____
owner-agent

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

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

Owner's Name Clarence Schwolff Address 1150 Michave Napoleon
 Contractor Self Telephone No. 599-9060
592-4901
 Address _____

Location of project 1150 Michave Cost of project 8,000.

Lot Information: (not required for siding job)

Lot No. 8 Subdivision Bachelmons 2nd addition

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

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

Building Information:

Residential _____ Commercial _____ Industrial _____

No. Units _____
 Addition _____ New Construction _____ Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: new footer tile - + bricking home
 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 3-20-79 Applicant's Signature Clarence Schwolff

PERMIT NO.

16-88

PERMIT FEE \$

0

