

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Building Permit

Permit Number: BP2006-54

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Printed: 7/12/2006

ADDRESS:

1320 Ohio St.

Applicant

Approval Date: 7/12/2006

Name: John Becker
Address: 1320 Ohio St
Napoleon, OH 43545

Owners

Name: Mr. John Becker
Address: 1320 Ohio St
Napoleon, OH 43545

Contractors**Fees and Receipts:**

Number	Description	Amount
FEE2006-299	Building Permit Fee (Auto)	\$0.00
Total Fees:		\$0.00
Total Receipts:		\$0.00

0
0

enclosing garage

APPLICANTS SIGNATURE:

DATE:

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 7-11-06 JOB LOCATION: 1320 Ohio St

OWNER: Tom Beckon PHONE: 419-592-0092

OWNER ADDRESS: 1320 Ohio St CITY: NAP ZIP: 43545

CONTRACTOR: SELF

PHONE #: 419-592-0092 CELL PHONE# _____

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: ENCLOSING GARAGE

ESTIMATED COMPLETION DATE: _____

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 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.