

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 8-25-00 JOB LOCATION 1 PARK CRT

LOT # _____ SUBDIVISION NAME _____

OWNER HAROLD NEUHAUSER PHONE 592-0431

OWNER ADDRESS 1 PARK CRT CITY NAPOLEON ZIP 43545

CONTRACTOR BARTON'S ELECTRIC PHONE 599-2992

CONTRACTOR ADDRESS 13414 CR S CITY NAPOLEON ZIP 43545

CONTRACTOR FAX # (419) 599-2792 CELL PHONE (Opt.) 769-0416

DESCRIPTION OF WORK TO BE PERFORMED: REPLACE MAST & METER SOCKET

ESTIMATED COST OF WORK TO BE PERFORMED: 150⁰⁰

WORK INFORMATION

BUILDING: Basement Floor Area _____ Sq. Ft. 1st Story Living Area _____ Sq. Ft.
2nd Floor Living Area _____ Sq. Ft. Garage Floor Area _____ Sq. Ft.

BUILDING SIZE: Length _____ Width _____ Stories _____ Height _____ DEMO VOL _____

Masonry Contractor _____
Address _____ City _____ Phone _____ Fax _____
St _____ Zip _____

Electrical Contractor _____
Address _____ City _____ Phone _____ Fax _____
St _____ Zip _____

Plumbing Contractor _____
Address _____ City _____ Phone _____ Fax _____
St _____ Zip _____

Heating Contractor _____
Address _____ City _____ Phone _____ Fax _____
St _____ Zip _____

Insulation Contractor _____
Address _____ City _____ Phone _____ Fax _____
St _____ Zip _____

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District _____ Lot Dimensions _____
Lot Area _____ FRSB _____ SYSB _____ RYSB _____ Max Ht _____ ft Max Cov _____ %

I by signing below agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that all work for which a permit is issued is required to be approved by the building inspector of the City of Napoleon.

Applicant Signature _____ Date _____