

P E R M I T

CITY OF NAPOLEON
255 W. RIVERVIEW AVE
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING
PH (419) 592-4010
FAX (419) 599-8393

PERMIT NO: 672

DATE ISSUED: 07-02-01

ISSUED BY: BND

JOB LOCATION: 12 PARK CRT

EST. COST: 2500.00

LOT #:

SUBDIVISION NAME:

OWNER: FINN, JAY
ADDRESS: 12 PARK CRT
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-2413

AGENT: SELF
ADDRESS:
CSZ:
PHONE:

USE TYPE - RESIDENTIAL:

OTHER:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD:
MAX HT: # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: REPLMNT: X ADD'N: ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

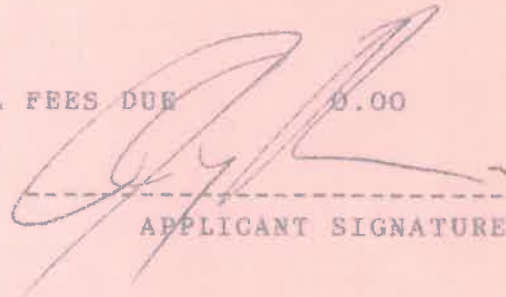
ROOF REPL (SHINGLES)

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		0.00

TOTAL FEES DUE 0.00

7/2/01

DATE



APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 672

DATE ISSUED: 07-02-2001

JOB LOCATION: 12 PARK CRT

OWNER: FINN, JAY

OWNER PHONE: 419-592-2413

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: ROOF REPL (SHINGLES)

PLUMBING: UNDGR _____ RGHIN _____ FINAL _____

SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

SERV UPGR _____

BUILDING: SITE _____ FTG _____ FNDDT _____

STRUC _____ ROOF _____ EXT _____

VENT _____ ACCES _____ EGRS _____

SMKDT _____ FINAL _____

ISSUE TEMP OCCUP _____ ISSUE OCCUP _____

STRG SHED: SITE _____ FINAL _____

SIGN: FTG _____ FINAL _____

FENCE: SITE _____ FINAL _____

MISC INSP: Roof 7-20-01

NOTES: _____

INSPECTOR INITIALS: BND