

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: 97144

DATE ISSUED: 05-13-97

ISSUED BY: BND

JOB LOCATION: 735 PARK ST

EST. COST: 400.00

LOT #:

SUBDIVISION NAME:

OWNER: FRABELL, MARILYN  
ADDRESS: 814 PARK ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-0365

AGENT: SELF  
ADDRESS:  
CSZ:  
PHONE:

USE TYPE - RESIDENTIAL: X

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

E - LGTH: WIDTH: STORIES: LIVING AREA SF:  
PAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION  
ELECTRICAL SERVICE UPGRADE

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
ELECTRICAL PERMIT		15.00

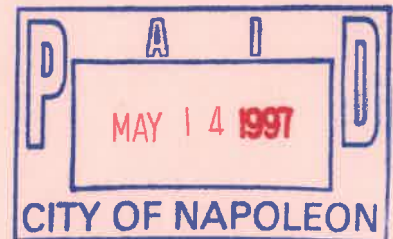
TOTAL FEES DUE 15.00

5-13-97

DATE

*Marilyn Frabell*

APPLICANT SIGNATURE



CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE  
(Please pickup at the City operations garage 1775 Industrial drive).

PERMIT #: 97144

ISSUED:05-13-97

JOB LOCATION: 735 PARK ST

OWNER: FRABELL, MARILYN

ADDRESS: 814 PARK ST NAPOLEON, OH 43545

OWNER PHONE: 419-599-0365

-----  
CONTRACTOR: SELF

ADDRESS:

CONTRACTOR PHONE:

ELECTRIC SERVICE UPGRADE  NEW SERVICE INSTALLATION \_\_\_\_\_

INDUSTRIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ RESIDENTIAL  1PHASE  3PHASE \_\_\_\_\_

SIZE OF SERVICE 100AMP \_\_\_\_\_ 150AMP \_\_\_\_\_ 200AMP  400AMP \_\_\_\_\_ OTHER \_\_\_\_\_

DESIRED VOLTAGE 120/240

UNDERGROUND SERVICE \_\_\_\_\_ OVERHEAD SERVICE

=====

DATE COMPLETED: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

OLD METER NUMBER: \_\_\_\_\_ NEW METER NUMBER: \_\_\_\_\_

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1-Copy Bldg Dept. 2-Copies Electric Dept. 1-Completed Copy to Utilities

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 97144

DATE ISSUED: 05-13-97

JOB LOCATION: 735 PARK ST

OWNER: FRABELL, MARILYN

OWNER PHONE: 419-599-0365

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: ELECTRICAL SERVICE UPGRADE

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: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INSPECTOR INITIALS: \_\_\_\_\_