

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: 99466

DATE ISSUED: 01-19-00

ISSUED BY: BND

JOB LOCATION: 1053 N PERRY ST

EST. COST: 5500.00

LOT #:

SUBDIVISION NAME:

OWNER: HOPE SERVICES  
ADDRESS: 110 NORTHCREST DR  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-2892

AGENT: VONDEYLEN PLBG & HTG  
ADDRESS: 116 E CLINTON ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-4756

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:	ADD'N:	ALTER:	REMODEL:
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WORK INFORMATION

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

WORK DESCRIPTION

FURNACE REPLACE & ADD ON A/C

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

MECHANICAL PERMIT  
ELECTRICAL PERMIT

10.00  
6.00

TOTAL FEES DUE 16.00

DATE

APPLICANT SIGNATURE



**APPLICATION FOR**

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FROM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. \_\_\_\_\_

PERMIT NO. \_\_\_\_\_ ISSUED \_\_\_\_\_

JOB LOCATION 1053 North Perry

LOT \_\_\_\_\_  
(Subdivision or Legal Description)

ISSUED BY \_\_\_\_\_  
(Building Official)

OWNER Hope Services PHONE 599-2892

ADDRESS 115 Northcrest Drive

AGENT Von Deylen Plbg+Htz PHONE 592-4756

ADDRESS 116 E. Clinton Napoleon

USE:  Residential ( ) Commercial ( ) Industrial  
( ) Other \_\_\_\_\_

WORK: ( ) New ( ) Addition ( Replacement ( ) Remodel

ESTIMATED COST = \$ 5500

<input type="checkbox"/> Building <input checked="" type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input checked="" type="checkbox"/> Mechanical <input type="checkbox"/> Demolition <input type="checkbox"/> Zoning <input type="checkbox"/> Sign <input type="checkbox"/> Water Tap <input type="checkbox"/> Sewer Tap <input type="checkbox"/> Temp Water <input type="checkbox"/> Temp Elec.	<table border="0" style="width:100%"> <tr> <td style="text-align:right"><u>Base</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Plus</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center"><u>6.00</u></td> <td style="text-align:center">\$</td> <td style="text-align:center"><u>6.00</u></td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center"><u>5.00</u></td> <td style="text-align:center">\$</td> <td style="text-align:center"><u>10.00</u></td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> <tr> <td style="text-align:right"><u>Total</u></td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> <td style="text-align:center">\$</td> <td style="text-align:center">_____</td> </tr> </table>	<u>Base</u>	\$	_____	\$	_____	\$	_____	<u>Plus</u>	\$	_____	\$	<u>6.00</u>	\$	<u>6.00</u>	<u>Total</u>	\$	_____	\$	_____	\$	_____	<u>Total</u>	\$	_____	\$	<u>5.00</u>	\$	<u>10.00</u>	<u>Total</u>	\$	_____	\$	_____	\$	_____	<u>Total</u>	\$	_____	\$	_____	\$	_____	<u>Total</u>	\$	_____	\$	_____	\$	_____	<u>Total</u>	\$	_____	\$	_____	\$	_____	<u>Total</u>	\$	_____	\$	_____	\$	_____
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Additional Structure \_\_\_\_\_ Hours \_\_\_\_\_  
Plan Review: Electric \_\_\_\_\_ Hours \_\_\_\_\_

TOTAL FEES . . . . . \$ 16  
Less Fees Paid . . . . . \$ 16  
BALANCE DUE . . . . . \$ \_\_\_\_\_

**ZONING INFORMATION**

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard

  

Max Height	No. Pkg. Spaces	No. Ldq. Spaces	Max Cover	Petition or Appeal Required-Date

**WORK INFORMATION**

Building: Ground Floor Area \_\_\_\_\_ sq. ft.      Basement Floor Area \_\_\_\_\_ sq. ft.

Garage Floor Area \_\_\_\_\_ sq. ft.      2nd Floor Area \_\_\_\_\_ sq. ft.      Other \_\_\_\_\_ sq. ft.

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: New furnace & A/C