

FIELD CORRECTION NOTICE

LOCATION 617 Perry Street North PERMIT NO. N/A

ISSUED TO _____
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES.

NOTICE DELIVERED TO 617 Perry Street North

Upon inspection, violations of the Ohio Basis Building Code Sec. 4101:2-1-11(C) were in evidence.

The following orders are hereby issued for their correction: If any alterations are being made to
this structure, a building permit is required,

Please contact the City Of Napoleon Building Department on this matter.
Phone 592-4010

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED AND MUST BE CORRECTED

ON OR BEFORE 4:30 pm, Friday 20Dec85

DATE 2:00 pm, Thursday 19Dec85

BY Paul Buehherr INSPECTOR

FIELD COPY

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CITY OF NAPOLEON
 BUILDING INSPECTION DEPARTMENT
 APPLICATION FOR BUILDING PERMIT
 (Please print or type)

The undersigned hereby makes application for construction, installation, or alteration work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 617 W. PERRY Cost of project _____
 Owner's Name PAUL MAAG Address 119 E. MAIN, LEIPSIC
 Contractor STANDARD LUMB. & SAWMILL CO. INC. Telephone No. _____

Address _____
 Lot Information: (Not required for siding job)
 Lot No. _____ Subdivision _____
 Zoning District _____ Lot Size _____ ft. X _____ ft. Area _____ sq. ft.
 Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

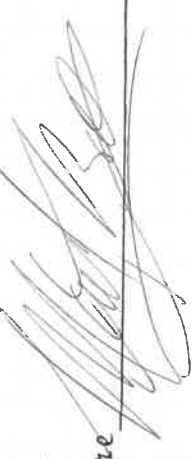
Work Information:
 Residential _____ Commercial _____ Industrial _____
 New Construction _____ Addition _____ Remodel _____

Accessory Building _____ Siding _____
 Brief Description of Work: ----- HOOD CHIMNEY FOR GARAGE AND
DEEP FREEZER WITH SUPPRESSION SYSTEM (Specific Type)

Size: Length _____ Width _____ No. of Stories _____
 Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.
 2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.
 3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 12-19-85 Applicant's Signature 

PERMIT NO. _____

PERMIT FEE \$ _____