

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: 99097

DATE ISSUED: 04-19-99

ISSUED BY: BND

JOB LOCATION: 1056 REYNOLDS ST

EST. COST: 14888.00

LOT #:

SUBDIVISION NAME:

OWNER: CRAWFORD, EVERETT
ADDRESS: 1056 REYNOLDS ST
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-6734

AGENT: ERIE CONSTRUCTION MI
ADDRESS: 4271 MONROE ST
CSZ: TOLEDO, OH 43606
PHONE: 419-472-4000

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:

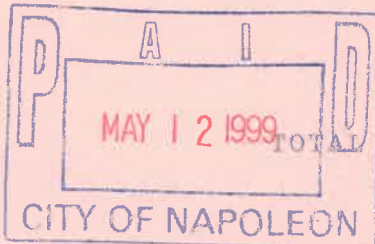
WORK TYPE - NEW: REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION
SIDING (VINYL)

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		67.00



TOTAL FEES DUE 67.00

DATE

APPLICANT SIGNATURE

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 4/15/99 JOB LOCATION 1056 REYNOLDS

LOT # _____ SUBDIVISION NAME _____

OWNER EVERETT P + SUE CRAWFORD PHONE 419-592-6734

OWNER ADDRESS 1056 REYNOLDS CITY NAPOLEON ZIP 43545

CONTRACTOR ERIE CONSTRUCTION PHONE 419-480-1328

CONTRACTOR ADDRESS 5247 SECOR #9 CITY TOLEDO ZIP 43623

CONTRACTOR FAX # 419-480-1337 CELL PHONE (Opt.) N/A

DESCRIPTION OF WORK TO BE PERFORMED: ~~W/ASB~~ INSTALL VINYL SIDING

ESTIMATED COST OF WORK TO BE PERFORMED: 14888.00

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 _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

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

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

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

Insulation Contractor _____ Phone _____ Fax _____
Address _____ City _____ 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 Stephanie Newell - Agent Date 4/15/99