

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Building Permit

Permit Number: BP2006-4

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Printed: 1/10/2006

Property Address: 430 Riverview Ave.

Applicant

Approval Date: 1/10/2006

Address: C & C Home Repair
1046 N Perry St
Napoleon, OH 43545

Phone: 419-599-1391

Owners

Name: Mr. Reed
430 Riverview Ave
Napoleon, OH 43545

Phone: 419-

Contractors C & C Home Repair
Address: 1046 N Perry St
Napoleon, OH 43545

Phone 419-599-1391

Fees and Receipts:

Number	Description	Amount
FEE2006-36	Windows/Doors (Auto)	\$6.00

Total Fees: \$6.00

Description

Structure Use:

Start Date:

Construction Value:

End Date:

Floor Areas: Living Space:

Basement/Storage:

Garage:

Description of work to be done:

Replacing windows



Applicant signature: Michael Camp

Date: 1-10-06

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBI
MECHANICAL, DEMOLITIONS, REMODELING.

DATE: 1-16-06 JOB LOCATION: 430 Riverview Ave.

OWNER: Reed PHONE: _____

OWNER ADDRESS: 430 Riverview Ave. CITY: Napoleon ZIP: 413545

CONTRACTOR: C & C Home Repair

PHONE #: 419-599-1391 CELL PHONE#: 419-579-0888

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO:

Is any of the above job going to be subcontracted out? Yes No:

If yes to whom: _____

DESCRIPTION OF WORK TO BE PERFORMED: Replacement window

ESTIMATED COMPLETION DATE: 1 day

PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- | | |
|---|--|
| <input type="checkbox"/> A/C ADD ON | <input type="checkbox"/> REMODELING |
| <input type="checkbox"/> BOILER REPLACEMENT | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> CURBING | <input type="checkbox"/> SEWER REPAIRS** |
| <input type="checkbox"/> DECKS * | <input type="checkbox"/> SIDEWALK* |
| <input type="checkbox"/> DRIVEWAY* | <input type="checkbox"/> SIDING |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE | <input type="checkbox"/> STORAGE SHED* |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW | <input type="checkbox"/> SWIMMING POOL* |
| <input type="checkbox"/> FENCE* | <input type="checkbox"/> FURNACE REPLACEMENT |
| <input type="checkbox"/> ADDITIONS* | <input type="checkbox"/> TEMP ELECTRIC |
| <input type="checkbox"/> FURNACE NEW | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER | <input checked="" type="checkbox"/> WINDOWS |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ZONING |

*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

** IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE