

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: 1683                      DATE ISSUED: 06-17-03                      ISSUED BY: BND

JOB LOCATION: 1330 SCOTT ST                      EST. COST:

LOT #:    SUBDIVISION NAME:

OWNER: FIRST CALL FOR HELP                      AGENT:  
ADDRESS: 1330 SCOTT ST                      ADDRESS:  
CSZ: NAPOLEON, OH 43545                      CSZ:  
PHONE: 419-599-1660                      PHONE:

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:

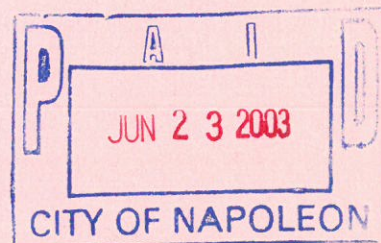
WORK DESCRIPTION  
OCCUPANCY PERMIT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
OCCUPANCY PERMIT		25.00

TOTAL FEES DUE                      25.00

6/23/03  
-----  
DATE

*Delma Danielson*  
-----  
APPLICANT SIGNATURE



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1683

DATE ISSUED: 06-17-2003

JOB LOCATION: 1330 SCOTT ST

OWNER: FIRST CALL FOR HELP

OWNER PHONE: 419-599-1660

CONTRACTOR:

CONTRACTOR PHONE:

WORK DESCRIPTION: OCCUPANCY PERMIT

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:                   BMD

CERTIFICATE OF OCCUPANCY  
THE CITY OF NAPOLEON  
ENGINEERING DEPARTMENT  
DIVISION OF INSPECTION

No. .... 558 .....

This is to certify that the Building or Land as herein described complies with all the building and health laws and ordinances and with the provisions of the Zoning Ordinance.

Location of Occupancy ..... 1330 Scott St. Suite A ..... Occupancy ..... Mental Health Facility .....

Owner of Property ..... First Call For Help Inc. .... Address ..... 1330 Scott St. Suite A .....

Issued to ..... Same ..... Address .....

Zoning ..... G-4 Planned Commercial ..... Bldg. Permit No. .... N/A .....

Substantial qualifications of occupancy ..... Substantial Building Code Compliance .....

This certificate is issued by the City Building Inspector, as provided by law, and is to certify that construction is completed substantially in conformity with the approved plans and permission is hereby granted to occupy such building in compliance with such legal use and occupancy as authorized under the provisions of the ordinances of the City of Napoleon.

Issued this .... 23 ..... day of ..... June ..... 19 2003  
Signed *[Signature]* .....  
City Building Inspector

This is a valuable record for owner or lessee and should be so preserved.