

PERMIT
CITY OF NAPOLEON, OHIO - BUILDING DEPARTMENT
 255 West Riverview Avenue, Napoleon, Ohio 43545 - (419) 592-4010

Permit No. <u>3178</u> Issued <u>4-22-94</u>	FEES	BASE	PLUS	TOTAL
Job Location <u>1429 N. Scott</u>	<input type="checkbox"/> Building	\$ 3.00	\$	\$ 3.00
Lot _____	<input type="checkbox"/> Electrical	\$	\$	\$
Issued by <u>Brent N. Damman</u>	<input type="checkbox"/> Plumbing	\$	\$	\$
Owner <u>Wendy's Restaurant 592-6363</u>	<input type="checkbox"/> Mechanical	\$	\$	\$
Address <u>1429 N. Scott</u>	<input type="checkbox"/> Demolition	\$	\$	\$
Agent <u>Self</u>	<input type="checkbox"/> Zoning	\$	\$	\$
Address _____	<input type="checkbox"/> Sign	\$	\$	\$
Use Type - Residential <u>X</u>	<input type="checkbox"/> Water Tap	\$	\$	\$
Other - Describe _____	<input type="checkbox"/> Sew. Insp.	\$	\$	\$
No. Dwelling Units _____	<input type="checkbox"/> Sewer Tap	\$	\$	\$
New <u>X</u> Replacement _____	<input type="checkbox"/> Temp. Water	\$	\$	\$
Add'n. <u>Alter</u> <u>Remodel</u>	<input type="checkbox"/> Temp. Elec.	\$	\$	\$
Mixed Occupancy _____	TOTAL FEES.....			\$ 3.00
Change of Occupancy _____	LESS FEES PAID.....			\$ 3.00
Estimated Cost \$ <u>500.00</u>	BALANCE DUE.....			\$ 0.00

ZONING INFORMATION

district	lot dimensions	area	front yd	side yd	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

PAID

WORK INFORMATION

APR 22 1994

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for Demo. Permit) _____

Electrical: _____

Plumbing: _____

Mechanical: _____

Additional Information: 8' X 10' storage shed

Date 4-22-94 Applicant Signature BND

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. 3178 ISSUED 4-22-94

JOB LOCATION 1429 N. Scott

LOT _____
(Subdivision or Legal Description)

ISSUED BY BND
(Building Official)

OWNER Wendy's Rest. PHONE 592-6363

ADDRESS 1429 N. Scott

AGENT Self PHONE _____

ADDRESS _____

USE: Residential () Commercial () Industrial
() Other _____

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

ESTIMATED COST = \$ 500.00

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
<input checked="" type="checkbox"/> Building	\$ <u>3.00</u>	\$ _____	\$ <u>3.00</u>
() Electrical	\$ _____	\$ _____	\$ _____
() Plumbing	\$ _____	\$ _____	\$ _____
() Mechanical	\$ _____	\$ _____	\$ _____
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
() Water Tap	\$ _____	\$ _____	\$ _____
() Sewer Tap	\$ _____	\$ _____	\$ _____
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Plan Review: Structure _____ Hours _____
Electric _____ Hours _____

TOTAL FEES	\$ <u>3.00</u>
Less Fees Paid	\$ _____
BALANCE DUE	\$ <u>3.00</u>

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>

<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Ldg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>

PAID

APR 22 1994

CITY OF NAPOLEON

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: Width _____ Length _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet
 Description of Work: 8'x10' storage shed