

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 155-79 Date Nov. 5, 1979
 Job Location 1057 N. Sheffield Valuation \$ 500.00
 Owner L. Farquharson Address 1057 N. Sheffield
Name
 Contractor Self-Son Telephone No. 592-2362
 Address _____
 Electric Contractor _____
 Plumbing Contractor _____
 Mechanical Contractor _____

This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.

Work Information:

Residential X (One) Commercial _____ Industrial _____
No. dwelling units
 New Construction X Addition _____ Remodel _____
 Brief Description of Work Storage shed

ISSUED BY R. E. Johnson Building Official DEPT. OF BUILDING & ZONING

It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- _____ Footing excavation prior to placing concrete.
- _____ Footing drains and foundation prior to backfill.
- X Prepared sub-grade prior to placing concrete floor slab.
- _____ Sanitary sewer
- _____ Rough-in electrical, plumbing and service framing prior to installing wall board.
- _____ Final electrical, plumbing and heating.
- X Final building inspection, prior to occupancy.

PERMIT & FEES

<input checked="" type="checkbox"/> Building Permit	\$ <u>3.00</u>
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
<input checked="" type="checkbox"/> Zoning Permit	\$ <u>-0-</u>
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>3.00</u>
LESS FEES PAID	\$ <u>-0-</u>
BALANCE DUE	\$ <u>3.00</u>

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

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

The undersigned hereby makes application for construction, installation, or alternation 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 1057 N. SHEFFIELD Cost of Project 500⁰⁰

Owner's Name L. PARJUKARSON Address 1057 N. SHEFFIELD

Contractor SELF - SON Telephone No. 592-2862

Address _____

Lot Information: (not required for siding job)

Lot No. H Subdivision BOCKELMAN'S 1ST

Zoning District _____ Lot Size _____ ft X _____ ft. Area _____ sq. ft.

Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential (one) Commercial _____ Industrial _____

New Construction Addition _____ Remodel _____

Accessory Building Siding _____

Brief Description of Work STORAGE SHED Specific Type _____

Size: Length 13' Width 10' No. of Stories _____

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Building _____ sq. ft.

3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: In place of old storage shed 8' x 10'

NO FEE FOR ZONING

*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 _____ Applicant's Signature L. Parjukarson

PERMIT NO. 155-19

PERMIT

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Permit No. 155-79 Date Nov. 5, 1979
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Owner L. Farguharson Address 1057 N. Sheffield
Contractor Self-Son Name Self-Son Telephone No. 592-2363
Address _____
Electric Contractor _____
Plumbing Contractor _____
Mechanical Contractor _____

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ISSUED BY [Signature] Building Official DEPT. OF BUILDING & ZONING

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