

PERMIT

City of Napoleon
255 W. Riverview
Napoleon, OH 43545

Division of Building and Zoning
PH (419) 592-4010
FAX (419) 599-8393

Permit No: 002033

Date Issued: 02-24-04

Issued by: BND

Job Location: 725 SHEFFIELD AVE

Est. Cost: 3000.00

Lot #:

Subdivision Name:

Owner: SOWERS, THOMAS
Address: 725 SHEFFIELD AVE
CSZ: NAPOLEON, OH 43545
Phone: 419-599-1741

Agent: S & K POWER
Address: 755 W CLINTON ST
CSZ: NAPOLEON, OH 43545
Phone: 419-592-0425

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:
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WORK INFORMATION

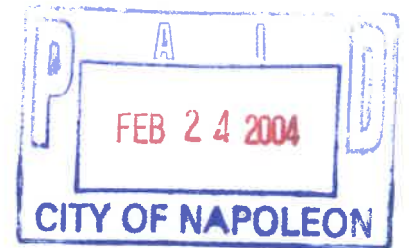
Size - Lgth:	Width:	Stories:	Living Area SF:
Garage Area SF:	Height:	Bldg Vol Demo Permit:	

WORK DESCRIPTION

ELECTRIC SERVICE UPGRADE

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
ELECTRICAL PERMIT		15.00

Total Fees Due 15.00



2-24-04
Date

J. Franz
Applicant Signature

City of Napoleon

Electric Meter Base Release Form

**THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER
BASE.**

(Please pickup at the City Operations Garage 1775 Industrial Drive).

Permit#002033

Date Issued: 02-24-2004

Job Location: 725 SHEFFIELD AVE

Work Description: ELECTRIC SERVICE UPGRADE

Owner: SOWERS, THOMAS

Address: 725 SHEFFIELD AVE NAPOLEON, OH 43545

Owner Phone: 419-599-1741

Contractor: S & K POWER

Address: 755 W CLINTON ST NAPOLEON, OH 43545

Contractor Phone: 419-592-0425

Electric Service Upgrade New Service Installation _____

Industrial _____ Commercial _____ Residential 1 Phase 3 Phase _____

Size of Service 100 Amp _____ 150 Amp _____ 200 Amp 400 Amp _____ Other _____

Hub Size – 1 1/4" _____ 1 1/2" _____ 2"

Desired Voltage 120/240 Other _____

Underground Service _____ Overhead Service

Date Completed: _____

Approved By: _____

Old Meter Number: _____

New Meter Number _____

Comments: _____

CITY OF NAPOLEON GENERAL PERMIT APPLICATION
THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL,
PLUMBING, MECHANICAL, DEMILITIONS, REMODELING

Date 2/19/04 Job Location 725 Sheffield Ave.
Owner Thomas Sowers Phone (419) 599-1741
Owner Address 725 Sheffield Ave. City Napoleon Zip 43545
Contractor S+K Power Phone 419-592-0425
Description of work to be performed Upgrade Service + Rewire Home
Estimated cost of work to be performed \$3,000.00

Please indicate the type of work you will be performing by

- | | |
|--|--|
| <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 checked="" type="checkbox"/> Electrical Service Upgrade | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Electrical Service New | <input type="checkbox"/> Storage Shed |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Street Bond |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Furnace Replacement | <input type="checkbox"/> Temp Electric |
| <input type="checkbox"/> Furnace New | <input type="checkbox"/> Water Tap |
| <input type="checkbox"/> Lawn Meter | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Zoning |
| <input type="checkbox"/> Others | |

2033 Permit Number

City of Napoleon Inspection Form

Permit #002033

Date Issued: 02-24-2004

Job Location: 725 SHEFFIELD AVE

Owner: SOWERS, THOMAS

Owner Phone: 419-599-1741

Contractor: S & K POWER

Contractor Phone: 419-592-0425

Work Description: ELECTRIC SERCIVE UPGRADE

Plumbing: UNDGR _____ RGHIN _____ FINAL _____

 SEWER INSP _____

Mechanical: UNDGR _____ RGHIN _____ FINAL _____

 FURNACE REPLAC _____ AIR COND _____

Electrical: UNDGR _____ RGHIN _____ FINAL _____

 SEVR UPGR 3-1-04

Building: Site _____ FTG _____ FNDDT _____

 STRU _____ ROOF _____ EXT _____

 VENT _____ ACCES _____ EGRS _____

 SMKDT _____ FINAL _____

 ISSUE TEMP OCCUP _____ ISSUE OCCUP _____

STGE Shed: SITE _____ FINAL _____

Sign: FTG _____ FINAL _____

Fence: SITE _____ FINAL _____

MISC INSP: _____

NOTES: _____

INSPECTORS INITIALS: BML