

Please complete this form for each job.

Fill areas marked *
CITY OF NAPOLEON OHIO PERMIT APPLICATION
THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITION, REMODELING

* DATE 4/14 * JOB LOCATION 1139 Stevenson

LOT # _____ SUBDIVISION NAME _____

* OWNER Irene Raugh * PHONE 599-3727

* OWNER ADDRESS 1139 Stevenson * CITY Napoleon * ZIP 43545

* CONTRACTOR Damman Plbg, Htg & AC * PHONE 758-3116

* CONTRACTOR ADDRESS N-033 Co. Rd 17-0 * CITY Akron * ZIP 43550

CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____

* DESCRIPTION OF WORK TO BE PERFORMED: Replace Furnace, Add A/C

* ESTIMATED COST OF WORK TO BE PERFORMED: \$ 4147.00

WORK INFORMATION

BUILDING: Basement Floor Area _____ Sq. Ft. 1st Story Living Area _____ Sq. Ft.
2nd Floor Living Area _____ Sq. Ft. Garage Floor Area _____ Sq. Ft.

BUILDING SIZE: Length _____ Width _____ Stories _____ Height _____ DEMO VOL _____

Masonry Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Electrical Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Plumbing Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Heating Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Insulation Contractor Address _____ City _____ Phone _____ Fax _____ St _____ Zip _____

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District _____ Lot Dimensions _____
Lot Area _____ FRSB _____ SYSB _____ RYSB _____ Max FR _____ R Max Cov _____ %

I by signing below agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that approval for which a permit is issued is required to be approved by the building department of the City of Napoleon.

* Applicant Signature Jessica J. Kinder 4/14/2000